

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-21151
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Crow Flats 16 State Com
8. Well Number 001
9. OGRID Number 162683
10. Pool name or Wildcat Atoka Gas Wildcat

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" FORM C-100 FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator  
Cimarex Energy Co. of Colorado

3. Address of Operator  
PO Box 140907; Irving, TX 75014-0907

4. Well Location  
Unit Letter G : 1980 feet from the North line and 1980 feet from the East line  
Section 16 Township 16S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3579' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type            Depth to Groundwater            Distance from nearest fresh water well            Distance from nearest surface water           

Pit Liner Thickness:            Below-Grade Tank: Volume            bbls; Construction Material           

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

09-26-06	Commenced re-entry operations. Removed dry hole marker.
09-27-06 to 10-07-06	Drilled out cement stringers from surface to 9200'.
10-09-06	Ran 5-1/2" 17# P-110 LTC casing to 9200'.
10-10-06	Cemented casing with 610 sx Permian Basin Super H (wt 13.0, yld 1.67) + 0.5% Halad® + 0.4% CFR-3 w/o Defoamer + 1# Salt + 5# Gilsomite + 0.125# Poly-e-flake + 0.35% HR-7. Released rig to go to the State Walton E 38H in Texas.
10-19-06	Pressure tested casing to 5000 psi for 30 minutes. Ran CBL and found TOC @ 5470'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Natalie Krueger TITLE Reg Analyst 1 DATE November 9, 2006

Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 972-401-3111

For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE            DATE 11/14/06  
Conditions of Approval (if any):