Form Approved. Form 9-331 Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR USA NM-27650
6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** 7. UNIT AGREEMENT NAME 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 Form 9–331–C for such proposals.) 8. FARM OR LEASE NAME Cimarron "SM" Federal gas Writ other 9. WELL NO. well #1 2. NAME OF OPERATOR FIELD OR WILDCAT NAME Cimarron Energy Corporati d - Ross Draw - Les 3. ADDRESS OF OPERATOR SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY See P.O. Box 1525 ARTESIA, OFFICE17 Sec. 25; T=26-S, R=30-E below.) AT SURFACE: 1980'FEL & 2310'F AT TOP PROD. INTERVAL: N/A AT TOTAL DEPTH: 242 feet 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) GR 3051 SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* (other) Extension of Time. 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* Cimarron Energy Corporation, as designated Operator of the above subject lease, does hereby respectfully request an extension of forty(40) days from the date of this notice so that the following may be done to prepare the lease for drilling. (1) Remove the cabletool currently holding the lease through diligent effort. (2) Clear and construct the pad location for a rotary rig operation. (3) Designate and transfer operations of subject lease. (4) Allow new Operator sufficient time to decide on and obtain drilling contractor of their choice. (5) Allow Drilling Contractor sufficient time to move on to location and commence rotary operations. Set @ ____ Ft. Subsurface Safety Valve: Manu. and Type ______ 18. I hereby certify that the foregoing is true and correct TITLE President _ DATE5-29-86 SIGNED

(This space for Federal or State office use)

TITLE ___

Orig. Spa., Challes C.

CONDITIONS OF APPROVAL, IF ANY

APPROVED BY