

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

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

WELL API NO. 30-025-22029
5. Indicate Type of Lease STATE X FEE
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MOBIL STATE
8. Well Number 001
9. OGRID Number 162683
10. Pool name or Wildcat VACUUM; L. WOLFCAMP, NORTH

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-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other **HOBBS OCD**

2. Name of Operator
CIMAREX ENERGY CO. OF COLORADO **AUG 22 2014**

3. Address of Operator
600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701 **RECEIVED**

4. Well Location
 Unit Letter: G : 1874 feet from the NORTH line and 1874 feet from the EAST line
 Section 03 Township 17S Range 34E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4,061' - GR

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

PERFC <input checked="" type="checkbox"/> E-PERMITTING TEMP <input checked="" type="checkbox"/> P&A NR <input checked="" type="checkbox"/> P&A R <input type="checkbox"/> PULL <input type="checkbox"/> INT to P&A <input type="checkbox"/> PL <input type="checkbox"/> DOWN <input type="checkbox"/> CSNG <input type="checkbox"/> CHG Loc <input type="checkbox"/> TA <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: WELL PLUGGED AND ABANDONED 08/18/14.
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

08/04-12/14: ATTEMPT TO DRILL OUT CICR @ 5,214' X TAG CIBP @ 10,585'(PER OCD); DEEPEST PT. OF PENT.= 5,843'.
 08/12/14: PUMP 50 SXS.CMT. @ 5,843'(PER OCD); WOC-NO TAG; PUMP 50 SXS.CMT. @ 5,843'; WOC.
 08/13/14: TAG CMT. @ 5,346'; PUMP 70 SXS.CMT. @ 5,346'; WOC X TAG @ 4,633'; PUMP 25 SXS.CMT. @ 3,390'; WOC.
 08/14/14: TAG CMT. @ 3,078'(OK'D BY OCD); PRES.TEST CSG. TO 700# X HELD FOR 15 MINS.; PUMP 25 SXS.CMT.@ 2,965'.
 08/15/14: CUT X PULL 4-1/2" CSG. @ 2,550'.
 08/16/14: PUMP 40 SXS.CMT. @ 2,610'; WOC X TAG CMT. @ 2,438'(OK'D BY OCD); PUMP 80 SXS.CMT. @ 1,820'; WOC.
 08/17/14: TAG CMT. @ 1,589'(OK'D BY OCD); PERF. X SQZ. 110 SXS.CMT. @ 370'; WOC X TAG CMT. @ 250'(OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 60 SXS.CMT. @ 63'-3'.
 08/18/14: DIG OUT X CUT OFF WELLHEAD 4' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David A. Eyer TITLE: AGENT DATE: 08/20/14

Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILGRO-RES.COM PHONE: 432.687.3033

For State Use Only
 APPROVED BY: Maley Brown TITLE: Dist. Supervisor DATE: 8/27/2014
 Conditions of Approval (if any)

AUG 27 2014

Handwritten mark