

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 122792

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-015-37806
1. Type of Well: O		5. Indicate Type of Lease S
2. Name of Operator CIMAREX ENERGY CO. OF COLORADO		6. State Oil & Gas Lease No.
3. Address of Operator 600 N. Marienfeld St, Suite 600, Midland, TX 79701		7. Lease Name or Unit Agreement Name DARTER 9 STATE
4. Well Location Unit Letter <u>E</u> : <u>2310</u> feet from the <u>N</u> line and <u>1140</u> feet from the <u>W</u> line Section <u>9</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County		8. Well Number 005
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3590 GR		9. OGRID Number 162683
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: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
CASING/CEMENT JOB ☐
Other: **Drilling/Cement** ☒

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.
8/2/10 Spud 16" hole. 8/4/10 Ran 10 jts 11-3/4" 42# H40 STC @ 458. Cmt w/ 150 sx C L & 200 sx C T. No rtns. Tag @ 110, 1" w/ 75 sx C. 8/5/10 Tag @ 100, 1" w/ 75 sx C, circ 10 sx. WOC 18 hrs. Test csg to 1400 psi 30 min, ok. 8/7/10 11" hole, ran 27 jts 8-5/8" 24# J55 STC @ 1130. Cmt w/ 200 sx POZC L, 300 sx C T. Circ 148 sx. WOC 21 hrs. Test csg 2000 psi 30 min, ok. 8/11/10 TD 7-7/8" hole @ 5195. 8/12/10 Ran 137 jts 5-1/2" 17# P110 LTC @ 5190. Cmt w/ 400 sx POZC L, 250 sx PVL T. Circ 43 sx. Test csg on compl rig. 8/13/10 RR. 8/2/2010 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
08/04/10	Surf	FreshWater	16	11.75	42	H40	0	458	500		C	110			
08/07/10	Int1	Brine	11	8.625	24	J55	0	1130	500		POZC, C				
08/12/10	Prod	Brine	7.875	5.5	17	P110	0	5190	650		POZC, PVL				

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 Electronically Signed **TITLE** Manager Operations Administration **DATE** 11/8/2010
Type or print name Zeno Farris E-mail address zfarris@magnumhunter.com Telephone No. 972-443-6489

For State Use Only:

APPROVED BY: Randy Dade **TITLE** District Supervisor **DATE** 11/8/2010 3:18:33 PM