

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., Aztec, 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. 30-015-37970
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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 ☐

2. Name of Operator
Cimarex Energy Co. of Colorado ✓

3. Address of Operator
600 N. Marienfeld, Ste. 600; Midland, TX 79701

4. Well Location
SHL Unit Letter A : 330 feet from the North line and 360 feet from the East line
Section 15 Township 19S Range 29E NMPM County Eddy ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3349 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:

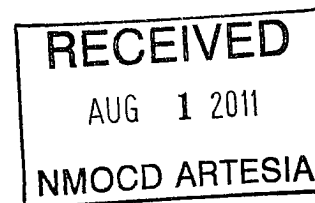
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
OTHER: <input type="checkbox"/>	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <input checked="" type="checkbox"/>	<input type="checkbox"/>
OTHER: <input type="checkbox"/>	<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.

04-05-11 Spud 17.5" hole.
04-06-11 Ran 13.375" 48# J55 STC @ 452. Cement with lead 300 sx Extendacem C and tail 220 sx Halcem C, no circ. Tagged @ 138. One-inched to 138 with 150 sx Halcem C, circ 13 sx. WOC 25.5 hrs, tested to 1500# for 30 min, ok.
04-10-11 In 12.25" hole, ran 9.625" 40# J55 LTC @ 2519. Cemented with lead 700 sx Econocem HLC and tail 215 sx Halcem C, circ 327 sx, WOC 26.5 hrs, tested to 1500# for 30 min, ok.
04-19-11 After reaching 7685 in 8.75" hole, kicked off 8.75" lateral @ 7685.
04-26-11 Reached TD of lateral @ 12475 MD, 8015 TVD.
04-28-11 Ran 5.5" 17# P110 PEAK liner. 12474-8215 LTC. 8215-7605 BTC. 7605-0 LTC. Cemented with lead 800 sx Econocem H and tail 1350 sx Versacem H.
04-29-11 TS TOC 600. RR.
05-13-11 Tested production casing to 3200# for 30 min, ok.



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 NMOC D guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Natalie Krueger TITLE Regulatory Analyst DATE July 29, 2011

Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 432-620-1936

For State Use Only

APPROVED BY: David Gray TITLE Field Supervisor DATE AUG 03 2011
Conditions of Approval (if any):

(Signature)