

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Cimarex Energy Co. of Colorado 600 N. Marienfeld St., Ste. 600 Midland, TX 79701		² OGRID Number 162683
		³ Reason for Filing Code/ Effective Date NW – 10/14/11
⁴ API Number 30 – 015-39024	⁵ Pool Name Sage Draw, Wolfcamp E.	⁶ Pool Code 84407
⁷ Property Code 36005	⁸ Property Name ORACLE 21 FEDERAL	⁹ Well Number 3

II. ¹⁰ Surface Location

Ul or lot no. D	Section 21	Township 25S	Range 36E	Lot Idn	Feet from the 690	North/South Line NORTH	Feet from the 820	East/West line WEST	County EDDY
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¹¹ **Bottom Hole Location**

UL or lot no. M	Section 21	Township 25S	Range 36E	Lot Idn	Feet from the 620	North/South line SOUTH	Feet from the 659	East/West line WEST	County EDDY
¹² Lse Code F	¹³ Producing Method Code P		¹⁴ Gas Connection Date 10/15/11		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

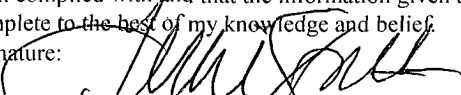
III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
21778	SUNOCO INC R & M	4013050
	P O BOX 2039; TULSA OK	
226737	Hunter Gas Gathering, Inc.	4013049
	600 N. Marienfeld St., Ste. 600, Midland, Tx	

IV. Well Completion Data

²¹ Spud Date 6/23/11	²² Ready Date 10/14/11	²³ TD 13276MD/9500TVD	²⁴ PBDT 13239	²⁵ Perforations 9511-13227	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17.5	13.375	450	585		
12.25	9.625	1825	640		
8.75	7	9050	1650		
6.125	4.5	8820-13268	470		

V. Well Test Data

³¹ Date New Oil 10/18/11	³² Gas Delivery Date 10/18/11	³³ Test Date 11/18/11	³⁴ Test Length 24	³⁵ Tbg. Pressure 1200	³⁶ Csg. Pressure 540
³⁷ Choke Size 36/64	³⁸ Oil 208	³⁹ Water 942	⁴⁰ Gas 3576		⁴¹ Test Method
⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: 			OIL CONSERVATION DIVISION DENIED <i>RRDade 05/11/12</i>		
Printed name: Terri Stathem					
Title: Regulatory					
E-mail Address: tstathem@cimarex.com			<i>COA: Need to provide Completion Sundry</i>		
Date: 1-30-12		Phone: 432-620-1936			