Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-015-38138
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		
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		7. Lease Name or Unit Agreement Name
PROPOSALS.)	<u> </u>	MAGNUM 16 STATE 8. Well Number
1. Type of Well: Oil Well	Gas Well Other	004H
2. Name of Operator		9. OGRID Number
Cimarex Energy Co. of Colorado		162683
3. Address of Operator		10. Pool name or Wildcat
600 N. Marienfeld, Ste. 600; Mid	lland, TX 79701	SCANLON DRAW; BONE SPRING
4. Well Location		
SHL Unit Letter B: 390		feet from the <u>East</u> line
Section 16 Township	195 Range 29E NMPM	CountyEddy
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	2.)
Pit or Below-grade Tank Application or	3362 GR	
	Distance from nearest fresh water well	Distance from nearest surface water
Pit Liner Thickness:		nstruction Material
	ppropriate Box to Indicate Nature of Notice	
NOTICE OF IN	* * · <u>* </u>	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK		
TEMPORARILY ABANDON	=	-
PULL OR ALTER CASING] MULTIPLE COMPL ☐ CASING/CEMEN	NT JOB
OTHER:	Request Permit Extension 🛛 OTHER:	口
starting any proposed work). SE recompletion. The APD for this well is due to expect the start of the start o	operations. (Clearly state all pertinent details, and give RULE 1103. For Multiple Completions: Attach volume on 9-2-12. Cimarex respectfully requests an	vellbore diagram of proposed completion or nextension due to rig scheduling.
/ur ext as	antel, new expiration date	9-2-2013
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		AUG 29 2012 NMOCD ASSESSED
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		AUG 2 9 2010 /
		LNMOCE
•		CD Faren
	above is true and complete to the best of my knowled closed according to NMOCD guidelines [], a general permit [
signature <i>AlboOlby</i>	TITLE Regulatory Admin A	Assistant DATE August 28, 2012
Type or print name Chlpe Alexal For State Use Only	nder email address: <u>cdalexander@cimare</u>	ex.com Telephone No. 432-620-1960
	W. Mand Contract	t 8/29/2013
APPROVED BY: (. C. Conditions of Approval (if any):	04.002//TITLE	DATE O / El/Col