

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 20105. Lease Serial No.
NMNM0144698

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other8. Well Name and No.
SUPERIOR FEDERAL 006

2. Name of Operator

CIMAREX ENERGY CO OF COLORADO

Contact: DAVID A EYLER

Mail: DEYLER@MILAGRO-RES.COM

9. API Well No.
30-015-23979

3a. Address

600 N. MARIENFELD, SUITE 600
MIDLAND, TX 79701

3b. Phone No. (include area code)

Ph: 432-687-3033

10. Field and Pool, or Exploratory
BURTON FLAT; STRAWN EAST

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 6 T20S R29E SESW 600FSL 1979FWL

11. County or Parish, and State

EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other |
| <input type="checkbox"/> Change Plans | <input checked="" type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

08/16/13: SET 4-1/2" CIBP @ 10,250'; CIRC. WELL W/ PXA FLUID.

08/17/13: PUMP 25 SXS.CMT. @ 10,250'; WOC X TAG TOP OF CMT. @ 9,979'; PUMP 25 SXS.CMT. @ 9,182'; WOC.

08/18/13: TAG CMT. PLUG @ 8,960'; PUMP 10 SXS.CMT. @ 8,960' (PER BLM); PUMP 30 SXS.CMT. @ 5,669' (PER BLM); WOC X TAG CMT. @ 5,616'; PRES. TEST 4-1/2" CSG. TO 1,000# - HELD OK; PUMP 25 SXS.CMT. @ 5,616' (PER BLM); WOC.

08/19/13: TAG TOP OF CMT. @ 5,391' (OK'D BY BLM); CUT X PULL 4-1/2" CSG. @ 3,595'.

08/20/13: CONT LAYING DOWN CSG.; PUMP 55 SXS.CMT. @ 3,645'; WOC.

08/21/13: TAG TOP OF CMT. @ 3,540'; PUMP 40 SXS.CMT. @ 3,540'; WOC X TAG TOP OF CMT. @ 3,417'; PUMP 55 SXS.CMT. @ 3,194'; WOC X TAG TOP OF CMT. @ 2,956'.

08/22/13: PUMP 40 SXS.CMT. @ 1,849'; WOC X TAG TOP OF CMT. @ 1,690'; PUMP 100 SXS.CMT. @ 1,045'; WOC X TAG TOP OF CMT. @ 734'; PUMP 85 SXS.CMT. @ 550'; WOC.

RECLAMATION
DUE 2-19-14Accepted as to plugging of the well here.
Liability under bond is retained until
Surface restoration is completed.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #218790 verified by the BLM Well Information System
For CIMAREX ENERGY CO OF COLORADO, sent to the Carlsbad
Committed to AFMSS for processing by JOHNNY DICKERSON on 09/05/2013 ()

Name (Printed/Typed) DAVID A EYLER

Title AGENT

Signature (Electronic Submission)

Date 09/03/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Accepted For Record
Approved By James R. Amos

Title SEP 5

Date 9-22-13

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office CFD

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Additional data for EC transaction #218790 that would not fit on the form

32. Additional remarks, continued

08/23/13: TAG TOP OF CMT. @ 223'; MIX X CIRC. TO SURF. 30 SXS. CMT. @ 63'-3';
DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CSGS. X INSTALL
DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 08/23/13.