

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTRECEIVED  
OCB Artesia  
APR 15 2014FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.*Lease Serial No.  
NMLC029387C**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

6. If Indian, Allottee or Tribe Name

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

## 1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
SHUGART APCO A 2

## 2. Name of Operator

Contact: DAVID A EYLER  
CIMAREX ENERGY COMPANY OF CO Mail: DEYLER@MILAGRO-RES.COM9. API Well No.  
30-015-05628-00-S1

## 3a. Address

600 NORTH MARIENFELD STREET SUITE 600  
MIDLAND, TX 79701

## 3b. Phone No. (include area code)

Ph: 432-687-3033

10. Field and Pool, or Exploratory  
SHUGART

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

Sec 29 T18S R31E NWNE 660FNL 1980FEL

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	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<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 recomplete 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 recompletion 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.)

03/29/14: SET 5-1/2" CIBP @ 3,250'; PRES. TEST CSG. TO 600# X HOLD; CIRC. WELL W/ PXA FLUID; PUMP 25 SXS.CMT. @ 3,250'-3,110'(CALC.).

03/30/14: PERF. SQZ. HOLES @ 2,050'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 500# X HOLD; PUMP 25 SXS.CMT. @ 2,110'(PER BLM); WOC X TAG CMT. @ 1,880'(OK'D BY BLM); PERF. X SQZ. 55 SXS.CMT. @ 818'; WOC.

03/31/14: TAG CMT. @ 770'; PERF. SQZ. HOLES @ 769'(PER BLM); ATTEMPT TO EST. INJ. RATE - PRES. UP TO 600# X HOLD; PERF. SQZ. HOLES @ 720'(PER BLM); ATTEMPT TO EST. INJ. RATE - PRES. UP TO 600# X HOLD; PUMP 25 SXS.CMT. @ 770'(PER BLM); WOC X TAG CMT. PLUG @ 512'.

04/01/14: PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 80 SXS.CMT. @ 100'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL GROUND LEVEL DRY HOLE MARKER.

RECLAMATION

DUE 8-28-14

Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.

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

Electronic Submission #240952 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY OF CO, sent to the Carlsbad  
Committed to AFMSS for processing by JAMES AMOS on 04/04/2014 (14DMH0297SE)

Name (Printed/Typed) DAVID A EYLER

Title AGENT

Signature

(Electronic Submission)

Date 04/03/2014.

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 04/06/2014
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 Carlsbad		

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

**Additional data for EC transaction #240952 that would not fit on the form**

**32. Additional remarks, continued**

WELL PLUGGED AND ABANDONED 04/01/14.