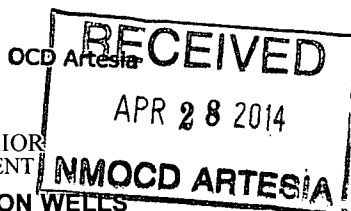


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT



FORM 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.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM38636
2. Name of Operator CIMAREX ENERGY COMPANY OF CO Contact: DAVID A EYLER E-Mail: DEYLER@MILAGRO-RES.COM		6. If Indian, Allottee or Tribe Name
3a. Address 600 NORTH MARIENFELD STREET SUITE 600 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-687-3033	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 27 T26S R29E SENE		8. Well Name and No. AMOCO FEDERAL 4
		9. API Well No. 30-015-24545-00-S1
		10. Field and Pool, or Exploratory BRUSHY DRAW
		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.)

04/08/14: SET 5-1/2" CIBP @ 4,875'; CIRC. WELL W/ PXA FLUID; PUMP 25 SXS.CMT. @ 4,875'-4,735'; PUMP 25 SXS.CMT. @ 3,807'; WOC.

04/09/14: TAG CMT. @ 3,589'(OK'D BY BLM); PERF. X SQZ. 45 SXS.CMT. @ 3,006' (PER BLM); WOC X TAG CMT. @ 2,971' (BLM REQUESTED WE WOC X RE-TAG IN AM).

04/10/14: TAG CMT. @ 2,971'; PERF. X SQZ. 80 SXS.CMT. @ 2,750' (PER BLM); WOC. 04/11/14: TAG CMT. @ 2,656'; PUMP 25 SXS.CMT. @ 2,656' (PER BLM); PERF. X SQZ. 45 SXS.CMT. @ 567'; WOC.

04/12/14: TAG CMT. @ 240'; PERF. X CIRC. TO SURF. 120 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 DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 04/14/14.

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

**RECLAMATION**  
**DUE 10-11-14**

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #242511 verified by the BLM Well Information System</b> <b>For CIMAREX ENERGY COMPANY OF CO, sent to the Carlsbad</b> <b>Committed to AFMSS for processing by JAMES AMOS on 04/19/2014 (14JLD1507SE)</b>	
Name (Printed/Typed) DAVID A EYLER	Title AGENT
Signature (Electronic Submission)	Date 04/16/2014

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 04/19/2014
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 \*\***