## Form 3160-5 (August 2007)

## NMOCD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Artesia

FORM APPROVE	Ò
OMB NO. 1004-01	3:
Expires: July 31, 20	1
Social Ma	

SUNDRY N	OTICES	AND R	<b>EPORTS</b>	ON WEL	LLS
Do not use this	form for	proposa	is to drill	or to re-e	nter an
handoned well	Hee for	m 2160-3	(APD) for	r such pr	nnnesle

	NO LICES WAD KELD				1414114141100332		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side.			7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well  ☑ Oil Well ☐ Gas Well ☐ Oth	her		<b>VI. 4.</b> 40. 1., 1	`	8. Well Name and No. SCOTER 6 FEDE		
Name of Operator     CIMAREX ENERGY COMPA	Contact: NY OF CO Mail: kknauls@	HOPE KNAUI cimarex.com	_S		9. API Well No. 30-015-41819-0	00-S1	
3a. Address 3b. Phone No. 202 S CHEYENNE AVE SUITE 1000 Ph: 918.58 TULSA, OK 74103.4346			(include area co 5.1100	de)	10. Field and Pool, or Exploratory COTTONWOOD DRAW-BONE SPRI		
4. Location of Well - (Footage, Sec., 7	., R., M., or Survey Description	)			11. County or Parish,	and State	
Sec 6 T25S R27E SWSE 330FSL 2190FEL 32.090985 N Lat, 104.134099 W Lon					EDDY COUNTY, NM		
12. CHECK APPI	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OI	F NOTICE, I	REPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION			TYPE	OF ACTION	,		
	☐ Acidize	☐ Deep	en	☐ Produ	ction (Start/Resume)	☐ Water Shut-Off	
Notice of Intent     ■	☐ Alter Casing		ure Treat	☐ Reclat	•	☐ Well Integrity	
☐ Subsequent Report	☐ Casing Repair	□ New	Construction	— Recon	plete	☑ Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug:	and Abandon		orarily Abandon	-	
	Convert to Injection	Plug	Back	□ Water	Disposal		
Cimarex respectfully requests  Current Pool Assignment: 133  Proposed Pool Assignment: 9	67 Cotton Draw; Bone S	pring		ced well:	·		
C102 Attached	· · ·		0,	,		CONSERVATION ESIA DISTRICT	
Approved by Paul Kautz 6/17/	15.	• .			NC	)V <b>1 9</b> 2015	
Submit C104 for pool chang production reporting. C115 designated to pool 97494 fr	reporting should be	11/19	1/2015		R	ECEIVED	
Comm	witted to AFMSS for proces	COMPAN	by the BLM W Y OF CO, sent ER SANCHEZ	t to the Carist	oad		
Name (Printed/Typed) HOPE KN.	AULS		Title REGU	JLATORY TE	CHNICIAN	·	
Signature (Electronic S	uhmission)		Date <b>06/24/</b>	/2015			
Signature (Coordinate)	THIS SPACE FO				ISE		
ACCEPTED F	OR RECORD					<del></del>	
Approved By /S/ DAV onditions of approval, if any, and wastled	DR-GLAS	not warrant or	Title			Date	
ertify that the applicant holds legal or equinich would entitle the applicant to condu-		subject lease	Office				
itle 18 U.S.C. Section 1001 and Title 43 t	U.S.C. Section 1212, make it a	crime for any pers	on knowingly at	nd willfully to m	ake to any department or	agency of the United	