

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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.*5. Lease Serial No.  
NMNM0413245

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.  
NMNM94519

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other8. Well Name and No.  
BLACKRIVER 10 FEDERAL COM 2

2. Name of Operator

CIMAREX ENERGY COMPANY OF CO

Contact: AMITHY E CRAWFORD

E-Mail: acrawford@cimarex.com

9. API Well No.  
30-015-32634-00-S1

3a. Address

202 S CHEYENNE AVE SUITE 1000  
TULSA, OK 74103.4346

3b. Phone No. (include area code)

Ph: 432-620-1909

10. Field and Pool, or Exploratory  
S CARLSBAD

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

Sec 10 T24S R26E SESW 1160FSL 1400FWL

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 checked="" 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 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Site Facility Diagram/Security Plan
	<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.)

Please see attached site facility diagram for the Black River 10 Fed Com #2.

**NM OIL CONSERVATION**

ARTESIA DISTRICT

MAR 14 2016

RECEIVED

Accepted for Record Purposes.

Approval Subject to Onsite Inspection.

Date:

3/13/16

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

Electronic Submission #322732 verified by the BLM Well Information System

For CIMAREX ENERGY COMPANY OF CO, sent to the Carlsbad

Committed to AFMSS for processing by CATHY QUEEN on 11/16/2015 (16CQ0015SE)

Name (Printed/Typed) AMITHY E CRAWFORD

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 11/06/2015

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

Approved By

Title

Date

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.

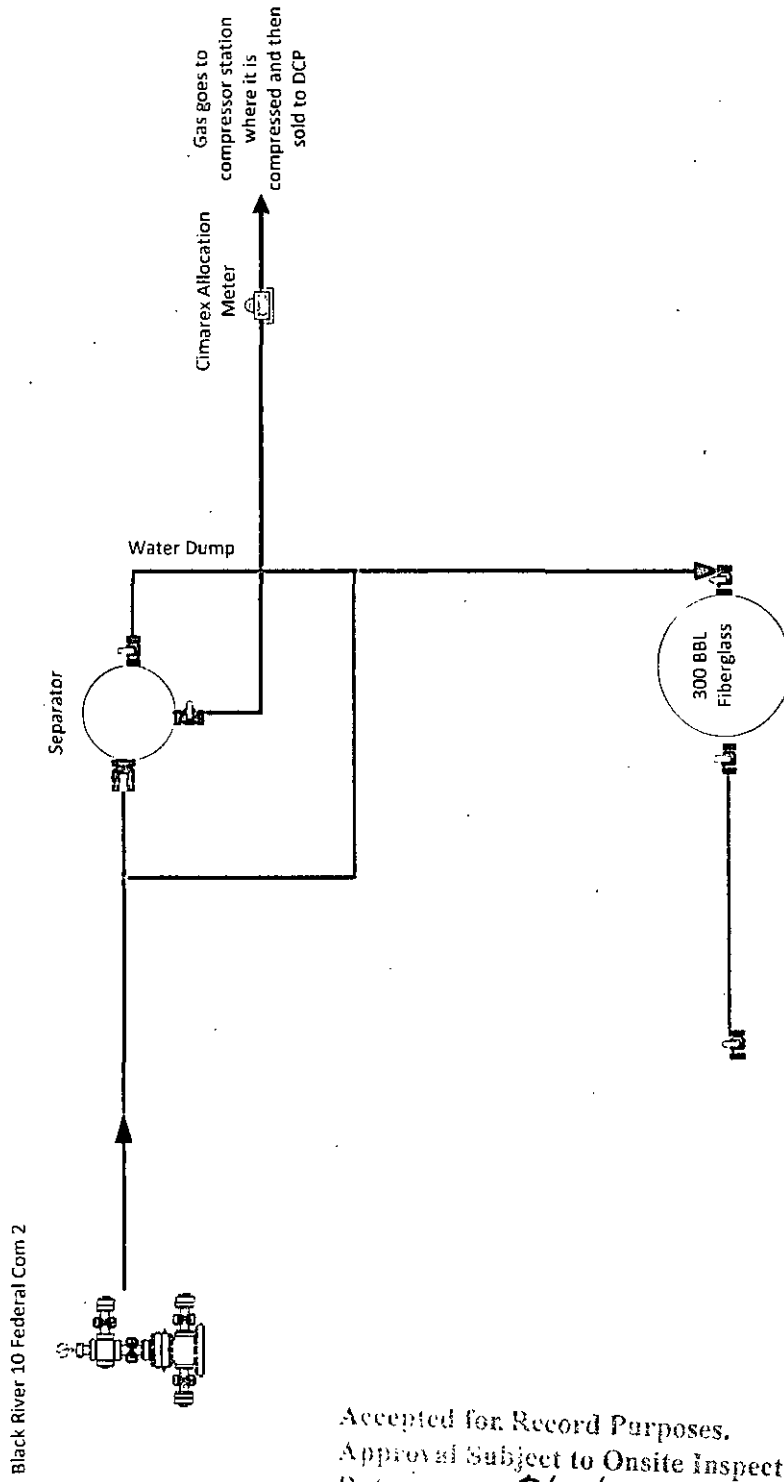
Office

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 \*\***

Accepted for record - NMOCD

# Site Facility Diagram



Accepted for Record Purposes.  
 Approval Subject to Onsite Inspection.  
 Date: 3/3/16  
*[Signature]*

Black River 10 Federal Com #2

N-10-24S-26E

30-015-32634

NMNM0413245

