

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTNMOCD  
ArtesiaFORM 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. NMNM100332
2. Name of Operator CIMAREX ENERGY COMPANY OF CO Contact: KIMBERLEIGH RHODES E-Mail: KiRhodes@cimarex.com		6. If Indian, Allottee or Tribe Name
3a. Address 202 S CHEYENNE AVE SUITE 1000 TULSA, OK 74103.4346	3b. Phone No. (include area code) Ph: 918-560-7081	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T25S R27E SESE 810FSL 330FEL		8. Well Name and No. SCOTER 6 FEDERAL 2
		9. API Well No. 30-015-39788-00-S1
		10. Field and Pool, or Exploratory COTTONWOOD DRAW-BONE SPRING
		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 checked="" type="checkbox"/> Other: Venting and/or Flaring
	<input type="checkbox"/> Change Plans	<input 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/BLA. 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.)

Cimarex Energy Co. flared the following volumes from January thru April 2016 at the Scoter 6 Federal #2 battery. The following wells sale gas at the facility:

Lease	Well Name/No.	API #	Location
NMNM100332	Scoter 6 Federal 2	3001539788	810 FSL 330 FEL
NMNM100332	Scoter 6 Federal 3	3001541819	330 FSL 2190 FEL
NMNM110348	Scoter 6 Federal 4	3001542260	330 FSL 1900 FWL
NMNM110348	Scoter 6 Federal 5	3001542273	330 FSL 660 FWL

All Wells in Sec 6 T25S R27E

January 2016 - 492 MCF

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

JUL 19 2016

**Accepted For Record** RECEIVED

NMOCD AB 8/21/16

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #340351 verified by the BLM Well Information System For CIMAREX ENERGY COMPANY OF CO, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 05/31/2016 (16PP1299SE)</b>	
Name (Printed/Typed) KIMBERLEIGH RHODES	Title REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 05/25/2016
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____
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 \*\***