Submit 1 Copy To Appropriate District State of New Me	xico	Form C-103							
Office <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 ARTESIA DISTRICT	ral Resources	Revised August 1, 2011 WELL API NO.							
SILS First St. Artagia NRA 99210 OIL CONSERVATION		5-39111							
<u>District III</u> – (505) 334-6178 AUG $23201/(220)$ South St. Fran	cis Dr.	dicate Type of Lease							
1000 Rio Brazos Rd., Aziec, NVI 87410 Sonto Eo. NIM 97		STATE FEE X ate Oil & Gas Lease No.							
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM <b>RECEIVED</b> 87505	0. 50	ate Off & Gas Lease No.							
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU		7. Lease Name or Unit Agreement Name							
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO	DOUGH	AS 32 FEE							
PROPOSALS.)		fell Number							
1. Type of Well: Oil Well X Gas Well Other	003								
2. Name of Operator CIMAREX ENERGY CO. OF COLORADO		9. OGRID Number 162683							
3. Address of Operator		Pool name or Wildcat							
600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701	PENA	ASCO DRAW; SA-YESO ASSOC.							
4. Well Location									
Unit Letter: D ; 990 feet from the NORTH	line and 330 feet	from the WEST line							
Section 32 Township 18S	Range 26E	NMPM EDDY County							
11. Elevation (Show whether DR,									
3,416' - 0	<u>GR</u>								
12. Check Appropriate Box to Indicate N	oture of Nation Papar	t or Other Data							
	ature of Notice, Repor	t of Other Data							
NOTICE OF INTENTION TO:	SUBSEQU	JENT REPORT OF:							
PERFORM REMEDIAL WORK 🔲 🛛 PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING							
TEMPORARILY ABANDON 🔲 CHANGE PLANS 📋	COMMENCE DRILLING	OPNS. 🔲 PANDA 🛛 🛛 🗙							
PULL OR ALTER CASING 🔲 MULTIPLE COMPL 🗌	CASING/CEMENT JOB								
OTHER:		ED AND ABANDONED 08/14/17.							
13. Describe proposed or completed operations. (Clearly state all p									
of starting any proposed work). SEE RULE 19.15.7.14 NMAC	. For Multiple Completion	ns: Attach wellbore diagram of							
proposed completion or recompletion.									
08/12/17: SET 5-1/2" CIBP @ 2,300'; CIRC. WELL W/ M.L.F.; P	RES. TEST 5-1/2" CSG. X	X CIBP TO 750# - HELD OK; PUMP							
25 SXS. CMT. @ 2,300'-2,100'; WOC X TAG CMT. @									
TO EST. INJ. RATE – PRES. UP TO 1,000# X HOLD;									
08/13/17: DID NOT TAG CMT. PLUG; PUMP 30 SXS. CMT. W	2% CACL @ 1,044'; WC	DC – DID NOT TAG CMT. PLUG;							
PUMP 45 SXS. CMT. W/ 2% CACL @ 1,044'; WOC.									
08/14/17: TAG CMT. @ 762' (OK'D BY OCD); PERF. X CIRC.									
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.									
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I hereby certify that the information above is true and complete to the be	st of my knowledge and b	elief.							
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	A OFNIT								
	AGENT	DATE: 08/15/17							
Type or print name: DAVID A. EYLER E-mail address: DE For State Use Only	YLER@MILAGRO-RES.	COM PHONE: 432.687.3033							
	A 1	0/20/10							
APPROVED BY: Mahut 2 Sure TITLE COMP	LIANE OFFICE	EN DATE 8/28/17							
Conditions of Approval (if any):	•								

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