Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

5. Lease Serial No.

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.

Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					1410114124	* *	
					6. If Indian, Allottee of		
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agree	ement, Name and/or No.	
Type of Well Gas Well □ Other					8. Well Name and No. MARQUARDT 1 FEDERAL 13		
Name of Operator CIMAREX	Contact: RHONDA SHELDON E-Mail: rsheldon@cimarex.com				9. API Well No. 30-015-37382		
3a. Address 202 S. CHEYENNE AVE SUITE 1000 TULSA, OK 74103 3b. Phone No. (include area code) Ph: 918-295-1709					10. Field and Pool or Exploratory Area WILDCAT BONE SPRING		
4. Location of Well (Footage, Sec., T	11. County or Parish, S	11. County or Parish, State					
Sec 1 T25S R26E NWNE 150	EDDY COUNTY, NM						
12. CHECK THE A	PPROPRIATE BOX(ES) TO	O INDICAT	E NATURE (OF NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
☐ Notice of Intent	☐ Acidize	☐ Deepen		☐ Production (Start/Resume)		■ Water Shut-Off	
_	☐ Alter Casing		☐ Hydraulic Fracturing		ation	☐ Well Integrity	
Subsequent Report	Casing Repair	□ New	Construction	☐ Recom	plete	Other Venting and/or Flari	
☐ Final Abandonment Notice	☐ Change Plans	Plug and		-	rarily Abandon	ng	
13. Describe Proposed or Completed Op-	Convert to Injection	☐ Plug Back (☐ Water I			
determined that the site is ready for f With this filling, Cimarex is rep mcf. JULY = 267 MCF AUGUST = 77 MCF	•	mber 30, 20	17 total volume	e flared as 34	14		
SEPTEMBER = 0 MCF				AIMA	OIL CONSERV	ATION	
				3. 61A 1	ARTESIA DISTRIC		
					DEC 0 5 2017	1////	
					RECEIVED		
14. I hereby certify that the foregoing is	Electronic Submission #39	MAREX, ser	t to the Carlsba	id /	7.7		
Name (Printed/Typed) RHONDA	SHELDON		Title R ∉GU	LATORY TE	CHNICIAN //	/	
Signature (Electronic	Submission)		Date 11/27/	ACCEPT	TED FOR REC	ORD //	
	THIS SPACE FOR	FEDERA	L OR STATE	OFF CE U	SE	In	
					0 (0)		
Approved By		:	Title			Date	
Conditions of approval, if any, are attache certify that the applicant holds legal or eq which would entitle the applicant to conditions.	Office	BUREAU CAR	OF LAND MAHAGEN				
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a cr statements or representations as to	ime for any per any matter wi	rson knowingly an thin its jurisdiction	d willfully to m			

(Instructions on page 2)

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SÜBMITTED **