

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

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

SUNDRY NOTICES AND REPORTS ON WELLS Artesia
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 page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM14124
2. Name of Operator CIMAREX		6. If Indian, Allottee or Tribe Name
3a. Address 202 S. CHEYENNE AVE SUITE 1000 TULSA, OK 74103		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 918-295-1709		8. Well Name and No. MARQUARDT FED 12
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 12 T25S R26E SESE 330FSL 400FEL		9. API Well No. 30-015-41850
		10. Field and Pool or Exploratory Area COTTONWOOD DRAW-BONE SPRI
		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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	Venting and/or Flaring
	<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 recomple 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

With this filing, Cimarex is reporting July 1 through September 30, 2017 total volume flared as 1221 mcf.

JULY = 86 MCF
AUGUST = 1086 MCF
SEPTEMBER = 49 MCF

OTHER WELLS ASSOCIATED WITH THIS FLARE:
MARQUARDT FED 11H 30-015-41849
MARQUARDT FED 18H 30-015-42418

NM OIL CONSERVATION
ARTESIA DISTRICT

DEC 05 2017

RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #396089 verified by the BLM Well Information System For CIMAREX, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/28/2017 ()	
Name (Printed/Typed) RHONDA SHELTON	Title REGULATOR
Signature (Electronic Submission)	Date 11/27/2017
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
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.	

(Instructions on page 2)

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