

<b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 <b>District II</b> 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 <b>District IV</b> 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Oil Conservation Division</b> <b>1220 S. St Francis Dr.</b> <b>Santa Fe, NM 87505</b>	Form C-103 August 1, 2011 Permit 252132 WELL API NUMBER 30-015-44489 5. Indicate Type of Lease S 6. State Oil & Gas Lease No.
--	---	--

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: S	8. Well Number 001
2. Name of Operator CIMAREX ENERGY CO.	9. OGRID Number 215099
3. Address of Operator 202 S. Cheyenne Ave., Suite 1000, Tulsa, OK 74103	10. Pool name or Wildcat

4. Well Location 1290  
 Unit Letter M : 1300 feet from the S line and feet 660 from the W line  
 Section 36 Township 24S Range 26E NMPM County Eddy

11. Elevation (Show whether DR, KB, BT, GR, etc.)  
 3387 GR

Pit or Below-grade Tank Application  or Closure   
 Pit Type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_  
 Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Spud</u> <input checked="" type="checkbox"/>
---	---

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  
 4/28/2018 Spudded well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE	<u>Electronically Signed</u>	TITLE	<u>Prod Admin Supervisor</u>	DATE	<u>5/9/2018</u>
Type or print name	<u>Genea A Holloway</u>	E-mail address	<u>gholloway@cimarex.com</u>	Telephone No.	<u>918-295-1658</u>

**For State Use Only:**

APPROVED BY:	<u>Raymond Podany</u>	TITLE	<u>Geologist</u>	DATE	<u>5/9/2018</u>
--------------	-----------------------	-------	------------------	------	-----------------