## JUN 0 4 2019

Submit One Copy To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Naturals (Marchael Marchael	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-29871
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE X
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Salita Te, Nivi 87303	6. State Oil & Gas Lease No.
87505		
	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		McGruder 13 State
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WCGruder 13 State
1. Type of Well: \(\infty\)Oil Well \(\subseteq\) Gas	Well Other	8. Well Number 4
2. Name of Operator		9. OGRID Number
Cimarex Energy of Colorado		162683
3. Address of Operator		10. Pool name or Wildcat
600 N. Marienfeld Ste #600; Midl		
4. Well Location	idita, 170 70701	Happy Valley;Morrow
Unit Letter N : 281 feet from the S line and 1924 feet from the W line		
Section 13 Township 22S Range 25E NMPM County Eddy		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3404'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING '		
•	HANGE PLANS COMMENCE DRILL	_
PULL OR ALTER CASING MU	JLTIPLE COMPL CASING/CEMENT	OB
OTHER:	□ N Location is rea	dy for OCD inspection after P&A
OTHER:		
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.		
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the		
To be the market at least 1. In diameter and at least 1. above \$10 and level has been bet in control. It shows the		
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR		
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR		
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.		
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and		
other production equipment.  Risers wat removed  Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.		
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with		
	's pit permit and closure plan. All flow lines, produc	
from lease and well location. Burge	d Pipe Not Removed Trush	CABLES NOT removed
from lease and well location. But a fire work lemoved Trush, Cables Not removed.  All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have		
to be removed.)	ave been addressed as non OCD miles	
	ive been addressed as per OCD rules. bandoned in accordance with 19.15.35.10 NMAC.	All fluids have been removed from non
retrieved flow lines and pipelines.	bandoned in accordance with 19.13.33.10 NWAC.	An indias have been removed from hon-
If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well		
location, except for utility's distribution in	aining well on lease: all electrical service noles and	lines have been removed from lease and well
iocation, except for utility s distribution in		lines have been removed from lease and well
/		lines have been removed from lease and well
When all work has been completed return	nfrastructure.	•
When all work has been completed, retar		•
	nfrastructure.  This form to the appropriate District office to scheoo	dule an inspection.
When all work has been completed, return SIGNATURE	nfrastructure.	dule an inspection.
SIGNATURE	nfrastructure.  This form to the appropriate District office to sched	dule an inspection.  PATE 6-4-2019
SIGNATURE  TYPE OR PRINT NAME Terri Stather	mfrastructure.  Title Regulatory Manage  E-MAIL: tstathem@cimare	dule an inspection.  PATE 6-4-2019
SIGNATURE	mfrastructure.  Title Regulatory Manage  E-MAIL: tstathem@cimare	DATE _6_4-2019