

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-35556
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
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: Oil Well ☒ Gas Well ☐ Other ☐

7. Lease Name or Unit Agreement Name Crow Flats 16 State Com
8. Well Number 002
9. OGRID Number 162683
10. Pool name or Wildcat CROW FLATS; WOLFCAMP

2. Name of Operator
Cimarex Energy Co. of Colorado

3. Address of Operator
PO Box 140907; Irving, TX 75014-0907

SEP 13 2007
OCD-ARTESIA

4. Well Location
SHL. Unit Letter M : 660 feet from the South line and 330 feet from the West line
Section 16 Township 16S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3573' 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: _____ Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB prod <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

05-26-07 Reached TD of 7-7/8" pilot hole (6750').
05-27-07 Pumped kick-off plug from 6300'-5800' w/ 220 sx Premium Plus (wt 17.0, yld 0.99).
05-28-07 Tagged cement @ 5778'.
05-29-07 Drilled cement and kicked off 7-7/8" horizontal leg @ 6114'.
06-28-07 Reached TD of horizontal hole (10534').
06-30-07 Ran 5-1/2" 17# N-80 LTC to 10534'. Cemented with 640 sx Permian Basin Super H + 0.5% Halad-344 + 0.25% D-Air 3000 + 0.4% CFR-3 + 1# Salt + 5# Gilsonite + 0.125# Poly-e-flake + 0.35% HR-7 (wt 11.9, yld 2.47).
07-01-07 Temperature Survey TOC @ 5820'. Released rig.
07-20-07 Pressure tested 5-1/2" casing to 3000 psi for 30 minutes.

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 NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Natalie Krueger TITLE Reg Analyst 1 DATE August 30, 2007

Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 469-420-2723

For State Use Only

FOR RECORDS ONLY

SEP 17 2007

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____