

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

~~1 & 2 Wells~~

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an OGD Artesia abandoned well. Use form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
NMNM114356

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
CIMAREX ENERGY COMPANY OF CO  
Contact: ARICKA EASTERLING  
E-Mail: aeasterling@cimarex.com

8. Well Name and No.  
SANDY FEDERAL 21H

9. API Well No.  
30-015-41791-00-X1

3a. Address  
600 NORTH MARIENFELD STREET SUITE 600  
MIDLAND, TX 79701

3b. Phone No. (include area code)  
Ph: 918-560-7060

10. Field and Pool, or Exploratory

WILDCAT  
**FORTY-NINER RIDGE, BS**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 23 T23S R30E SESE 0225FSL 0250FEL  
32.170182 N Lat, 103.503782 W Lon

11. County or Parish, and State

EDDY COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Cimarex was unable to circulate cement to surface on this well. Top of cement via CBL was found to be at 4440' and the previous casing (9-5/8") was set at 3,852'. In order to remediate to get cement to surface per R-111-P Secretary's Potash, Cimarex proposes to perform a bradenhead squeeze between the 5-1/2" production casing string and 9-5/8" intermediate casing string. Cimarex plans to pump 550 sacks of 50/50 poz/C plus 5% Salt, 10% bentonite, 3 lb/sk LCM, 0.4 lb/sk anti-foam mixed at 11.9 ppg and 2.46 cuft/sk yield. Cement will be allowed to sit under pressure for 12 hours and 24 hours prior to performing any pressure test according to R-111-P.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

Accepted for record AUG 25 2014  
NMOCD T6  
8-25-14 RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #257631 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY OF CO, sent to the Carlsbad  
Committed to AFMSS for processing by CHRISTOPHER WALLS on 08/20/2014 (14CRW0313SE)

Name (Printed/Typed) ARICKA EASTERLING

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 08/20/2014

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

Date

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

**APPROVED**  
AUG 20 2014  
/s/ Chris Walls

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 any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***