

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

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 abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator CIMAREX ENERGY COMPANY OF CO Contact: HOPE KNAULS E-Mail: kknaults@cimarex.com	5. Lease Serial No. NMNM4350
3a. Address 202 S CHEYENNE AVE SUITE 1000 TULSA, OK 74103.4346	3b. Phone No. (include area code) Ph: 918.585.1100	6. If Indian, Allottee or Tribe Name
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T19S R30E SWNW 1980FNL 180FWL		7. If Unit or CA/Agreement, Name and/or No. NMNM134727
		8. Well Name and No. HACKBERRY 23 FEDERAL 1H
		9. API Well No. 30-015-41115-00-S1
		10. Field and Pool, or Exploratory HACKBERRY
		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 Venting and/or Flaring
	<input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon
	<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 recomplete 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 recompletion 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 Energy respectfully requests approval to flare the Hackberry 23 Federal 1H,2H,3H Flare meter for period not to exceed 90 days. Cimarex has recently completed the well but high line pressure and compressor installation requires a low volume gas flare.

Cimarex proposes to flare a limited amount of gas from the well beginning May 2, 2015 to July 1, 2015. The information below indicates the anticipated flare volumes:

May 2015: 4500 MCF
June 2015: 4500 MCF
July 2015: 4500 MCF

Handwritten: OKD 10/15/15
Accepted for record
NMOCD

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL
NM OIL CONSERVATION**

ARTESIA DISTRICT
OCT 14 2015

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

**Electronic Submission #302956 verified by the BLM Well Information System
For CIMAREX ENERGY COMPANY OF CO. sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/02/2015 (16JAS0072SE)**

Name (Printed/Typed) HOPE KNAULS	Title REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 05/26/2015

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 _____

**RECEIVED
ACCEPTED FOR RECORD**

OCT 8 2015

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

Additional data for EC transaction #302956 that would not fit on the form

32. Additional remarks, continued

A subsequent report of actual flare volumes will be sent after July 1, 2015. All volumes will be reported on the OGOR reports. Cimarex will comply with NTL-4A requirements.

Wells associated with flare meter
Hackberry 23 Fed 1H 30-015-41115
Hackberry 23 Fed 2H 30-015-42093
Hackberry 23 Fed 3H 30-015-42078

mmmm/34722
mmmm/34729

Flaring Conditions of Approval

1. Report all volumes on OGOR B as disposition code 08.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. Flared volumes will still require payment of royalties
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. Include meter serial number on sundry.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days from date requested on sundry.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JAM 100615