

Submit 1 Copy To Appropriate District Office
 District I – (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II – (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III – (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV – (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
DEC 11 2018
 OIL CONSERVATION DIVISION
 1220 South Santa Fe Street
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

WELL API NO. 30-015-22809	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name PARKWAY "A" STATE COM.	
8. Well Number 001	
9. OGRID Number 162683	
10. Pool name or Wildcat ATOKA	
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator CIMAREX ENERGY CO. OF COLORADO	
3. Address of Operator 600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701	
4. Well Location Unit Letter H : 1980 feet from the NORTH line and 990 feet from the EAST line Section 15 Township 19S Range 29E NMPM LEA County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,324.1' – GR	

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

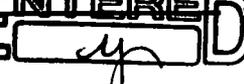
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: WELL PLUGGED AND ABANDONED 12/04/18.

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11/28/18: TAG EXISTING 4-1/2" CIBP @ 10,662'; CIRC. WELL X PRES. TEST CSG. TO 750# - HELD OK; PUMP 90 SXS. CMT. @ 9,901'; WOC X TAG CMT. PLUG @ 8,877' (OK'D BY OCD).
 11/29/18: PERF. SQZ. HOLES @ 6,900'; ATTEMPT TO EST. INJ. RATE – PRES. UP TO 750# AND HOLD.
 11/30/18: PUMP 60 SXS. CMT. @ 6,950' (PER OCD); WOC X TAG CMT. PLUG @ 6,105'.
 12/01/18: CUT 4-1/2" CSG. @ 2,832' – NOT FREE; PUMP 40 SXS. CMT. @ 2,882' (PER OCD); WOC.
 12/02/18: TAG CMT. PLUG @ 2,386'; PERF. X SQZ. 110 SXS. CMT. @ 1,437'; WOC X TAG CMT. PLUG @ 1,050'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 100 SXS. CMT. @ 300'-3'.
 12/04/18: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

Spud Date: MIRU: 11/27/18 Rig Release Date: RDMO: 12/03/18

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ENTERED


SIGNATURE  TITLE: AGENT DATE: 12/06/18

Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILAGRO-RES.COM PHONE: 432.687.3033

For State Use Only

APPROVED BY:  TITLE: Staff mg DATE: 12-11-18
 Conditions of Approval (if any):