

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

COPY

OCD-ARTESIA

FORM APPROVED
OMB No 1004-0135
Expires July 31, 1996**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 type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NM-14468	
2 Name of Operator Cimarex Energy Co. of Colorado		6. If Indian, Allottee or Tribe Name	
3a. Address 600 N. Marienfeld St., Ste. 600 Midland, TX 79701		7. If Unit or CA/Agreement, Name and/or No. SRM-1173	
3b. Phone No. (include area code) 432-571-7800		8. Well Name and No. Grynberg 11 Federal Com No. 3	
4 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1500' FSL & 1300' FWL L-11-25S-26E		9. API Well No. 30-015-34193	
		10. Field and Pool, or Exploratory Area White City; Penn (Gas)	
		11. County or Parish, State Eddy, 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 checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<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	

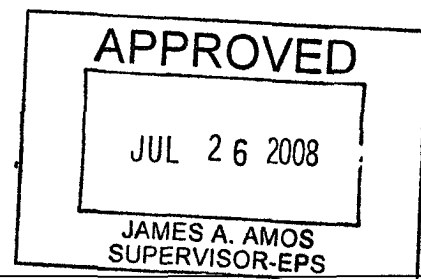
13. Describe Proposed or Completed Operation (clearly state all pertinent details, included estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths 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.)

The Grynberg 11 Federal Com #3 is currently TA'd in the Morrow (11529-11925) behind a series of CIBP's. Cimarex proposes to perf, acidize & fracture stimulate the Atoka formation (11001-11009) along w/the Strawn (10626-10644 & 10756-10760). The well will be returned to production as an Atoka/Strawn (Gas) producer.

Please see attached Plat.

**SUBJECT TO LIKE
APPROVAL BY STATE**

At Subsequent Report provide OCD Auth.
for DHC.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Laci Luig

Signature

Title

Engineer Tech.

Date

July 14, 2008

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	

Title 18 U.S.C. Section 1001, makes 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

(Instructions on reverse)

Accepted for record - NMOCD

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, 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 & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised October 12, 2005
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

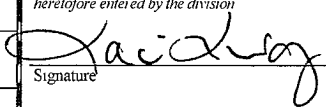
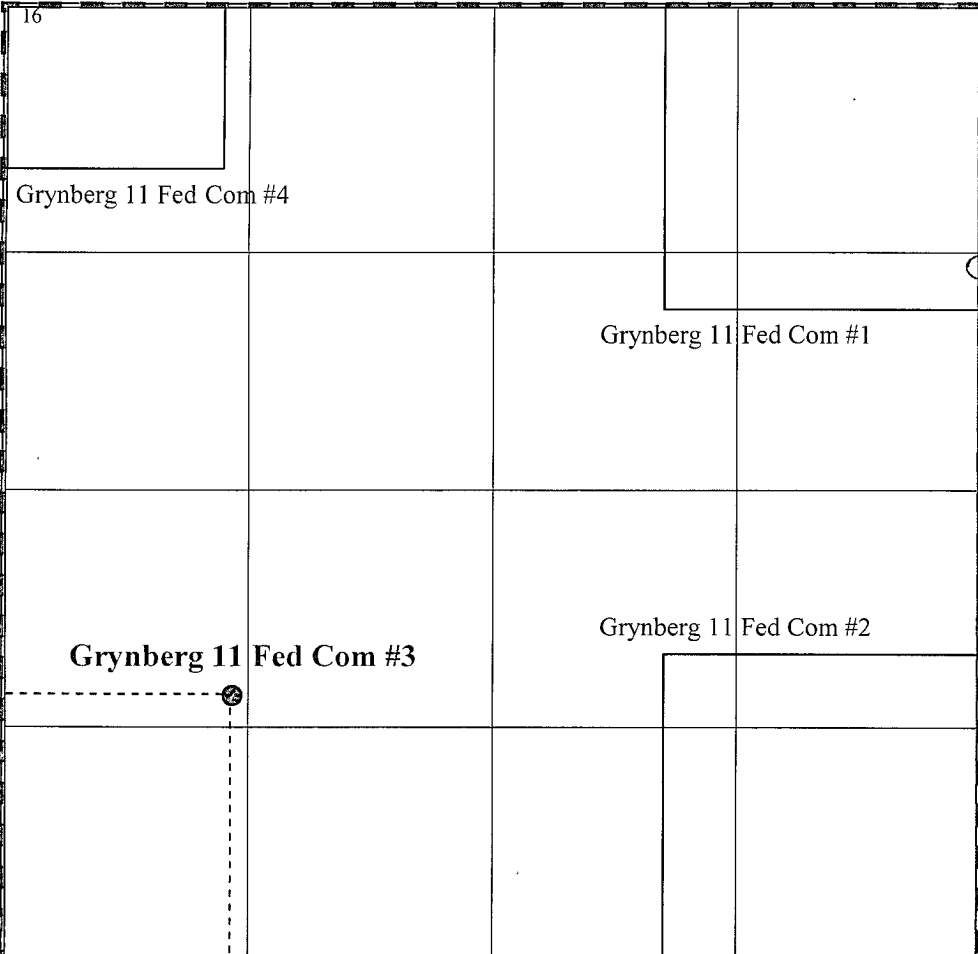
WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-34193		² Pool Code	³ Pool Name White City; Wildcat
⁴ Property Code	⁵ Property Name Grynberg 11 Federal Com		⁶ Well Number 3
⁷ OGRID No. 162683	⁸ Operator Name Cimarex Energy Co. of Colorado		⁹ Elevation 3328'

¹⁰ Surface Location									
UL or lot no. L	Section 11	Township 25S	Range 26E	Lot Idn	Feet from the 1500'	North/South line South	Feet from the 1300'	East/West line West	County Eddy

¹¹ Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 640		¹³ Joint or Infill	¹⁴ Consolidation Code		¹⁵ Order No.				

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

¹⁶					¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division</i>  7/14/08 Signature _____ Date _____ Laci Lung - Engineer Tech Printed Name _____	
Grynberg 11 Fed Com #4					Grynberg 11 Fed Com #1	
Grynberg 11 Fed Com #3					Grynberg 11 Fed Com #2	
					¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i> Date of Survey _____ Signature and Seal of Professional Surveyor _____ Certificate Number _____	