

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.*

OCD Artesia

**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		5. Lease Serial No. NMNM95630
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. PENDING
3b. Phone No. (include area code) Ph: 432-620-1936 Fax: 432-620-1940		8. Well Name and No. CAVE LAKE 13 FEDERAL COM 003
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T16S R28E SENE 1980FNL 150FEL 32.92510 N Lat, 104.12177 W Lon		9. API Well No. 30-015-37005
		10. Field and Pool, or Exploratory ABO WILDCAT
		11. County or Parish, and State EDDY COUNTY, NM

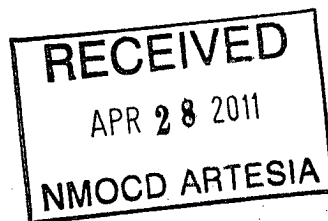
## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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	
	<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 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.)

The APD for this well is due to expire on 03-12-11. Cimarex respectfully requests an extension due to rig scheduling.

Accepted for record  
NMOCD *DS*  
5-3-11



APPROVED FOR 24 MONTH PERIOD  
ENDING 3/12/13

Engineer review completed 2/16/11 TJS

14. I hereby certify that the foregoing is true and correct. Electronic Submission #102170 verified by the BLM Well Information System For CIMAREX ENERGY CO. OF COLORADO, sent to the Carlsbad	
Name (Printed/Typed) NATALIE E KRUEGER	Title REGULATORY
Signature (Electronic Submission)	Date 02/07/2011

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <i>[Signature]</i>	Title <i>AFM</i>	Date <i>4/25/11</i>
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 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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***