Submit 1 Copy To Appropriate District	State of New Mexico HOBBS OCD- RECEIVED 11/18/20			Form C-103	
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources			Revised August 1, 2011	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.		
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		30-025-43292	- Vandatater		
District III – (505) 334-6178	611 5. 1 list 5t., Artesia, 14.01 60210		5. Indicate Type of		
1000 Rio Brazos Rd., Aztec, NM 87410	ztec, NM 87410 Sonto Eo NIM 97505		STATE 6. State Oil & Gas I	FEE X	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Will Company to the Company of the C		6. State Off & Gas I	Lease No.	
87505					
SUNDRY NOTI	7. Lease Name or U	nit Agreement Name			
(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			CVIVED AS SELVED	CHIEF 20 STATE	
PROPOSALS.)			CHIEF 30 STATE		
1. Type of Well: Oil Well X Gas Well Other			8. Well Number	#006	
2. Name of Operator			9. OGRID Number		
CIMAREX ENERGY CO.			162683		
3. Address of Operator			10. Pool name or Wildcat		
600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS			BERRY; BONE SPRING, NORTH		
4. Well Location					
Unit Letter: L : 234	48 feet from the SOUTH lin	ne and 805 fe	et from the EAST	line	
Section 30 Township 20S Range 35E NMPM LEA County					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
3,725' - GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Bata					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR					
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB PN				PNR	
DOWNHOLE COMMINGLE					
OTHER:		OTHER: WELL B	PLUGGED AND ARANI	ONED 11/18/20	
OTHER: OTHER: WELL PLUGGED AND ABANDONED 11/18/20 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.					
11/14/20: TAG EXISTING 5-1/2" CIBP @ 11,304' CIRC. WELL W/ M.L.F.; PRES. TEST CSG.X CIBP TO 500#- HELD OK.					
11/15/20: PUMP 25 SXS. CMT. @ 11,304'-11,104'; PUMP 25 SXS. CMT. @ 8,674'-8,494'; PUMP 25 SXS. CMT. @ 5.800'.					
11/16/20: TAG CMT. PLUG @ 5,741'; PUMP 30 SXS. CMT. @ 5,741' (PER OCD); WOC X TAG CMT. PLUG @ 5,447': PUMP 100 SXS. CMT. @ 4,332' WOC.					
11/17/20: TAG CMT. PLUG @ 3,686'; PUMP 25 SXS. CMT. @ 3,686'-3,486' (PER OCD); PUMP 50 SXS. CMT. @ 2,150';					
WOC X TAG CMT. @ 1,741'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 40 SXS. CMT. @ 29150',					
11/18/20: 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.					
			44/00/000	DIA NIMOOD	
			11/20/2020) - PM NMOCD	
a					
MIRU PXA EQUIP.	: 11/13/20	RDMO PX	A EQUIP.: 11/18/20		
2			80		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
t ICA > - O					
SIGNATURE DATE: 11/18/20					
Type or print name: DAVID A. EY	LER E-mail address: DE	EYLER@MILAGR	O-RES.COM PHON	NE: 432.687.3033	
For State Use Only					
APPROVED BY: TITLE Compliance Officer A DATE 11/20/20					
Conditions of Approval (if any)					