

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

**HOBBS OCD**  
**JAN 08 2013**

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

**OIL CONSERVATION DIVISION**

**RECEIVED** 220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-22029 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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"/>		7. Lease Name or Unit Agreement Name  MOBILE STATE ✓
2. Name of Operator Cimarex Energy Co. of Colorado		8. Well Number 001 ✓
3. Address of Operator 600 N. Marienfeld, Ste. 600; Midland, TX 79701		9. OGRID Number 162683 ✓
4. Well Location SHL Unit Letter <u>G</u> : 1874 feet from the <u>North</u> line and 1874 feet from the <u>East</u> line Section <u>3</u> Township <u>17S</u> Range <u>34E</u> NMPM County <u>Lea</u>		10. Pool name or Wildcat Vacuum; Lower Wolfcamp, North ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4061 GR		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: Request TA Status Extention <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  
 Cimarex respectfully requests an extension of TA Status for 1 year. We are currently evaluating the area for secondary recovery.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Chloe Alexander TITLE Regulatory DATE October 11, 2012

Type or print name Chloe Alexander email address: cdalexander@cimarex.com Telephone No. 432-620-1938  
 For State Use Only

APPROVED BY: [Signature] TITLE Dist. Mgr DATE 1-9-2013  
 Conditions of Approval (if any):

**APR 03 2013**