

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

Form C-103
 Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-32640	✓
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 LEA AQ STATE	✓
8. Well Number 007	✓
9. OGRID Number 162683	
10. Pool name or Wildcat PEARL SAN ANDRES, WEST	

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 Gas Well Other **HOBBS OCD**

2. Name of Operator
CIMAREX ENERGY CO. OF COLORADO ✓ **SEP 11 2015**

3. Address of Operator
600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701 **RECEIVED**

4. Well Location
 Unit Letter K : 1650 feet from the SOUTH line and 1650 feet from the WEST line
 Section 29 Township 19S Range 35E NMPM County LEA ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3,756' - GR

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

E-PERMITTING <SWD _____ INJECTION> PE CONVERSION _____ RBDMS _____ TE RETURN TO _____ TA _____ PI CSNG _____ ENVIRO _____ CHG LOC _____ DI INT TO PA _____ P&A NR <u>PM</u> P&A R _____ OTHER: <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"/>
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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.

09/03/15: SET 5-1/2" CIBP @ 5,450'; CIRC. WELL W/ PXA MUD; PRES. TEST CIBP X 5-1/2" CSG. TO 600# - HELD OK; PUMP 75 SXS. CMT. @ 5,450'-4,892'.
 09/04/15: PUMP 45 SXS. CMT. @ 3,508'; WOC X TAG CMT. PLUG @ 3,016'; PUMP 25 SXS. CMT. @ 1,860'; WOC.
 09/05/15: TAG CMT. PLUG @ 1,628'; PERF. SQZ. HOLES @ 488'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 1,000# X HOLD; PUMP 40 SXS. CMT. @ 538' (PER OCD); WOC X TAG CMT. PLUG @ 280'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 25 SXS. CMT. @ 63'-3'.
 09/06/15: 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: 08/30/15

Rig Release Date: RDMO: 09/09/15

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

SIGNATURE David A. Eyler TITLE: AGENT DATE: 09/09/15

Type or print name: DAVID A. EYLER E-mail address: deyler@milagro-res.com PHONE: 432.687.3033

For State Use Only
 APPROVED BY: Maley Brown TITLE Dist Supervisor DATE 9/14/2015
 Conditions of Approval (if any): **SEP 15 2015**