

**HOBBS OCD**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

APR 18 2016

**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.

**RECEIVED**

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMLC063586
2. Name of Operator CIMAREX ENERGY COMPANY OF CO Contact: RHONDA SHELDON E-Mail: rsheldon@cimarex.com		6. If Indian, Allottee or Tribe Name
3a. Address 202 S CHEYENNE AVE. SUITE 1000 TULSA, OK 74103	3b. Phone No. (include area code) Ph: 918-295-1709	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T19S R32E NENW 990FNL 1880FWL		8. Well Name and No. LUSK WEST DELAWARE UNIT 903
		9. API Well No. 30-025-34172-00-S1
		10. Field and Pool, or Exploratory LUSK
		11. County or Parish, and State LEA 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input 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, including 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.)

This well was plugged in 12/03/11. Unit has since sold. Reclamation has been completed to the best of our knowledge.

Ready for final inspection.

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #333653 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY OF CO, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 03/21/2016 (16PP0413SE)**

Name (Printed/Typed) RHONDA SHELDON	Title REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 03/14/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <i>James R. Jones</i>	Title <i>Supv. PET</i>	Date <i>3.30-16</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 <i>CFD</i>

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

**FOR RECORD ONLY**

*MW/OCD 4-18-2016*

APR 18 2016

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