

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

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

DEC 09 2016 RECEIVED

WELL API NO. 30-025-34247
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 011
9. OGRID Number 162683
10. Pool name or Wildcat PEARL SAN ANDRES, WEST
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,732' - GR

**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

2. Name of Operator  
CIMAREX ENERGY CO. OF COLORADO

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

4. Well Location  
 Unit Letter M : 990 feet from the SOUTH line and 990 feet from the WEST line  
 Section 29 Township 19S Range 35E NMPM County LEA

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

<p><b>NOTICE OF INTEREST</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PI          TEMPORARILY ABANDON <input type="checkbox"/> C          PULL OR ALTER CASING <input type="checkbox"/> M          DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: _____</p>	<p><b>INT TO PA</b>  <b>P&amp;A NR</b> <u>pm x</u>  <b>P&amp;A R</b> _____</p>	<p><b>SUBSEQUENT REPORT OF:</b></p> <p>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"/></p> <p>OTHER: WELL PLUGGED AND ABANDONED 11/23/16.</p>
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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.

- 11/21/16: SET 5-1/2" CIBP @ 5,700'; CIRC. WELL W/ PXA FLUID; PRES. TEST CSG. X CIBP TO 750# - HELD OK; PUMP 60 SXS. CMT. @ 5,700'-5,225'; PUMP 40 SXS. CMT. @ 3,500'; WOC.
- 11/22/16: TAG CMT. PLUG @ 3,167' (OK'D BY OCD); PUMP 25 SXS. CMT. @ 1,860'; WOC X TAG CMT. PLUG @ 1,605' (OK'D BY OCD); MIX X CIRC. TO SURF. 60 SXS. CMT. @ 495'-3' (PERF BLM).
- 11/23/16: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULUS; WELD ON STEEL PLATE TO SURF. X INSTALL DRY HOLE MARKER.

Spud Date: MIRU: 11/19/16 Rig # \_\_\_\_\_

Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms.

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

SIGNATURE David A. Eyer TITLE: AGENT DATE: 11/28/16

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

**For State Use Only**

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 12/12/2016

Conditions of Approval (if any): \_\_\_\_\_