

**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.*

**OCD Hobbs**

5. Lease Serial No.  
NMNM128835

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
LEA 7 FEDERAL COM 2H

9. API Well No.  
30-025-42546

10. Field and Pool or Exploratory Area  
WILDCAT; BONESPRING

11. County or Parish, State  
EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
CIMAREX ENERGY COMPANY  
Contact: HOPE KNAULS  
E-Mail: hknaults@cimarex.com

3a. Address  
202 S. CHEYENNE AVE.  
TULSA, OK 74103

3b. Phone No. (include area code)  
Ph: 918-585-1100

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 7 T20S R35E 379FSL 1730FWL

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Change to Original A PD
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

The Permit for this well is due to expire 5-26-2017. Cimarex Energy Respectfully requests a 2 year permit extension.

**HOBBS OCD**

MAR 06 2017

**RECEIVED**

APPROVED FOR 24 MONTH PERIOD  
ENDING 4-29-2019

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

Electronic Submission #361899 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY, sent to the Hobbs  
Committed to AFMSS for processing by DEBORAH MCKINNEY on 01/09/2017 ()

Name (Printed/Typed) HOPE KNAULS Title REGULATORY TECHNICIAN

Signature (Electronic Submission) Date 12/22/2016

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

Approved By J. D. V. [Signature] Title TLPEP Date 2/22/17

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 CFO

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.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

*KV*