

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

Form C-103
 Revised August 1, 2011

HOBBS OCD
AUG 04 2017
RECEIVED

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.)		WELL API NO. 30-025-34720
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CIMAREX ENERGY CO. OF COLORADO		6. State Oil & Gas Lease No.
3. Address of Operator 600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701		7. Lease Name or Unit Agreement Name LEA AQ STATE
4. Well Location Unit Letter <u>CJ</u> : 1650 feet from the SOUTH line and 2310 feet from the EAST line Section 29 Township 19S Range 35E NMPM County LEA		8. Well Number 013
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,751' - GR		9. OGRID Number 162683
		10. Pool name or Wildcat PEARL SAN ANDRES, WEST

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETIONS <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		INTENT TO PERFORM P&A P&A NR <u>FM-X</u> P&A R _____	SUBSEQUENT REPORT OF: RKB <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> FILLING OPERATIONS <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> PLUG JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: WELL PLUGGED AND ABANDONED 07/29/17.	

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.

07/27/17: SET 4-1/2" CIBP @ 5,700'; CIRC. WELL W/ M.L.F.; PRES. TEST 4-1/2" CSG. TO 600# - HELD OK; PUMP 55 SXS. CMT. @ 5,700'-5,150'; PUMP 25 SXS. CMT. @ 3,500'-3,370' (PER OCD); PUMP 25 SXS. CMT. @ 1,855'; WOC.
 07/28/17: TAG CMT. PLUG @ 1,509' (OK'D BY OCD); PERF. SQZ. HOLES @ 488'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 700# X HOLD; PUMP 25 SXS. CMT. @ 538' (PER OCD); WOC.
 07/29/17: TAG CMT. PLUG @ 380' (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 25 SXS. CMT. @ 63'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI - OK; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

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. Due By 07-28-2018
 NM State Land Office should be contacted for approval of site restoration plan.

Spud Date: MIRU: 07/24/17 Rig Release Date

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: 07/31/17
 Type or print name: DAVID A. EYLER E-mail address: deyler@milagro-res.com PHONE: 432.687.3033
For State Use Only
 APPROVED BY: Mark P. E. S. TITLE: P.E.S. DATE: 08/07/2017
 Conditions of Approval (if any):