

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.*

5. Lease Serial No.  
NMLC063228

6. If Indian, Allottee or Tribe Name

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

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

RECEIVED

OCT 24 2017

HOBBS OCD

<p>1. Type of Well  <input checked="" type="checkbox"/> Oil Well   <input type="checkbox"/> Gas Well   <input type="checkbox"/> Other</p> <p>2. Name of Operator                  CIMAREX ENERGY COMPANY   <i>Contact: ARICKA EASTERLING</i>  <i>E-Mail: aeasterling@cimarex.com</i></p> <p>3a. Address                  202 S. CHEYENNE AVE, SUITE 1000                  TULSA, OK 74103</p> <p>3b. Phone No. (include area code)                  Ph: 918-560-7060</p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description)                  Sec 25 T23S R32E SWSW 510FSL 1140FWL</p>	<p>8. Well Name and No.                  TRISTE DRAW 25 FEDERAL COM 11H</p> <p>9. API Well No.                  30-025-43997</p> <p>10. Field and Pool or Exploratory Area                  TRISTE DRAW BONE SPRING</p> <p>11. County or Parish, State                  LEA COUNTY, NM</p>
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**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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A PD
	<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.

Cimarex respectfully request approval to change the original approved rig layout diagram. The rig layout including v-door and flare line may change depending on rig availability. The pad dimensions and orientation will remain the same. There will be no additional disturbance if a rig layout change is necessary to accommodate the drilling rig.

Engineering Coord. Zofa Stevens

NRS AB USE Existing COA'S 10-11-17

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

**Electronic Submission #392442 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY, sent to the Hobbs  
Committed to AFMSS for processing by ZOTA STEVENS on 10/19/2017 ()**

Name (Printed/Typed) ARICKA EASTERLING	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 10/18/2017

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

Approved By _____	Title _____	Date _____
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	OCT 19 2017	

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 \*\***

APPROVED

OCT 19 2017

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BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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