

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

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

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-025-38690
2. Name of Operator CIMAREX ENERGY CO.		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS		6. State Oil & Gas Lease No.
4. Well Location Unit Letter: J : 2000 feet from the SOUTH line and 2220 feet from the EAST line Section 21 Township 15S Range 36E NMPM LEA County		7. Lease Name or Unit Agreement Name CAUDILL SOUTH 21 FEE
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,895' - GR		8. Well Number #003H

HOBBS OCD
JAN 02 2018
RECEIVED

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

NOTICE OF I PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: _____]	SUBSEQUENT REPORT OF: 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"/> OTHER: WELL PLUGGED AND ABANDONED 12/26/17.
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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.

- 12/19/17: SET 5-1/2" CIBP @ 10,250'; CIRC. WELL W/ M.L.F.; PRES. TEST CIBP X CSG. TO 750# - HELD OK; PUMP 75 SXS. CMT. @ 10,250'-9,667'; PUMP 25 SXS. CMT. @ 8,321'-8,051'; PUMP 25 SXS. CMT. @ 6,763'-6,603'.
- 12/20/17: PUMP 25 SXS. CMT. @ 4,600'; WOC X TAG CMT. PLUG @ 4,330'; PUMP 25 SXS. CMT. @ 3,150'; WOC X TAG CMT. PLUG @ 2,910'; PUMP 25 SXS. CMT. @ 2,070'; WOC.
- 12/21/17: TAG CMT. PLUG @ 1,848' (OK'D BY OCD); PERF. X SQZ. 55 SXS. CMT. @ 655'; WOC X TAG CMT. PLUG @ 495'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 35 SXS. CMT. @ 100'-3'.
- 12/26/17: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER.

Spud Date: MIRU: 12/15/17 Rig Release

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.
 Restoration Due By 12-20-2018

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: 12/26/17
 Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILAGRO-RES.COM PHONE: 432.687.3033
For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer DATE 01-03-2018
 Conditions of Approval (if any):