

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 July 18, 2013

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

WELL API NO. 30-025-43626
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 State LF 32-5
8. Well Number #2H
9. OGRID Number 215099
10. Pool name or Wildcat Vacuum; Upper Penn NW
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4127'

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-100) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator Cimarex Energy Co

3. Address of Operator 202 S. Cheyenne Ave., Suite 1000
Tulsa OK 74103

4. Well Location
 Unit Letter D : 330' feet from the North line and 715 feet from the West line
 Section 32 Township 16S Range 34E NMPM County Lea

HOBBES OGD
 MAR 14 2018
 RECEIVED

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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.

- 12/28/2017 Pressure tested casing to 500psi good test.
- 12/29/2017 to 2/26/2018 Perf Cisco Lime formation from 17686' to 11339' with 1172 shots, .43. Fraced with 10607196 gal slickwater and 10045297# sand.
- 3/3/2018 Mill out plugs and Co to PBD
- 3/5/2018 Turn well over to production. Tubing will be ran at a later date.

Spud Date: Rig Release Date:

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

SIGNATURE Amithy Crawford TITLE Regulatory Analyst DATE 3/7/2018

Type or print name Amithy Crawford E-mail address: acrawford@cimarex.com PHONE: 432-620-1909

For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 3-16-18

Conditions of Approval (if any):

Provide Gas Capture Plan