

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

HOBBSS OGD
 MAY 02 2018
 RECEIVED

<p style="text-align: center;">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator CIMAREX ENERGY CO.</p> <p>3. Address of Operator 600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS</p> <p>4. Well Location Unit Letter: A : 330 feet from the NORTH line and 330 feet from the EAST line Section 01 Township 23S Range 32E NMPM LEA County</p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,744' - GR</p>	<p>WELL API NO. 30-025-33531</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/></p> <p>6. State Oil & Gas Lease No. V-4297</p> <p>7. Lease Name or Unit Agreement Name CORIANDER AOC STATE</p> <p>8. Well Number #001</p> <p>9. OGRID Number 215099</p> <p>10. Pool name or Wildcat RED TANK; BONE SPRINGS</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: _____</p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>P AND A <input checked="" type="checkbox"/></p> <p>OTHER: WELL PLUGGED AND ABANDONED 04/26/18</p>
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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.

- 04/21/18: SET 5-1/2" CIBP @ 8,500'; CIRC. WELL W/ M.L.F.; PRES. TEST 5-1/2" CSG. X CIBP TO 700# - HELD OK; PUMP 25 SXS. CMT. @ 8,500'-8,320'.
- 04/22/18: PUMP 60 SXS. CMT. @ 5,004'; WOC.
- 04/23/18: TAG TOP OF CMT. PLUG @ 4,610' (OK'D BY OCD); CUT X PULL 5-1/2" CSG. @ 2,500'.
- 04/24/18: FINISH POOH LAYING DOWN 5-1/2" CSG.; PUMP 45 SXS. CMT. @ 2,560'; WOC.
- 04/25/18: TAG TOP OF CMT. PLUG @ 2,379' (OK'D BY OCD); PUMP 90 SXS. CMT. @ 1,330'; WOC X TAG TOP OF CMT. PLUG @ 1,045' (OK'D BY OCD); MIX X CIRC. TO SURF. 40 SXS. CMT. @ 150'-3'.
- 04/26/18: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CSGS. X INSTALL BELOW GROUND 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, which may be found on the OCD web page under forms.
 Restoration Due By _____

Release Date: RDMO: 04/26/18

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: 04/26/18

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 Whitman TITLE: P.E.S. DATE: 05/02/2018

Conditions of Approval (if any):