

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires July 31, 1996

**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.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
Cimarex Energy Co. of Colorado

3a. Address  
PO Box 140907; Irving, TX 75014-0907

3b. Phone No. (include area code)  
972-401-3111

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
660' FNL & 1650' FEL  
B-5-19S-34E

5. Lease Serial No.

NM-4314

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

Pipeline B5 Federal No. 1

9. API Well No.

30-025-38043

10. Field and Pool, or Exploratory Area

E-K; Bone Spring

11. County or Parish, State

Lea County, NM

**12. CHECK 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"/> Fracture Treat	<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 type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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, included estimated starting date of any proposed work and approximate duration thereof.  
If the proposal is to deepen directionally or recompleat 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 shall be filed within 30 days  
following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once  
testing has been completed. Final Abandonment Notices shall 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 will use Patterson Rig 503 to drill this well. We have revised the rig plat (see attached).  
Also, we are converting this to a closed system.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Natalie Krueger

Signature

Title

Reg Analyst 1

Date

September 15, 2006

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

Approved by

/s/ James Stovall

**ACTING**

Title **FIELD MANAGER**

Date **SEP 20 2006**

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 **CARLSBAD FIELD OFFICE**

Title 18 U.S.C. Section 1001, makes 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 reverse)

# Patterson Rig 503

Cimarex Energy Co. of  
Colorado  
Irving Texas

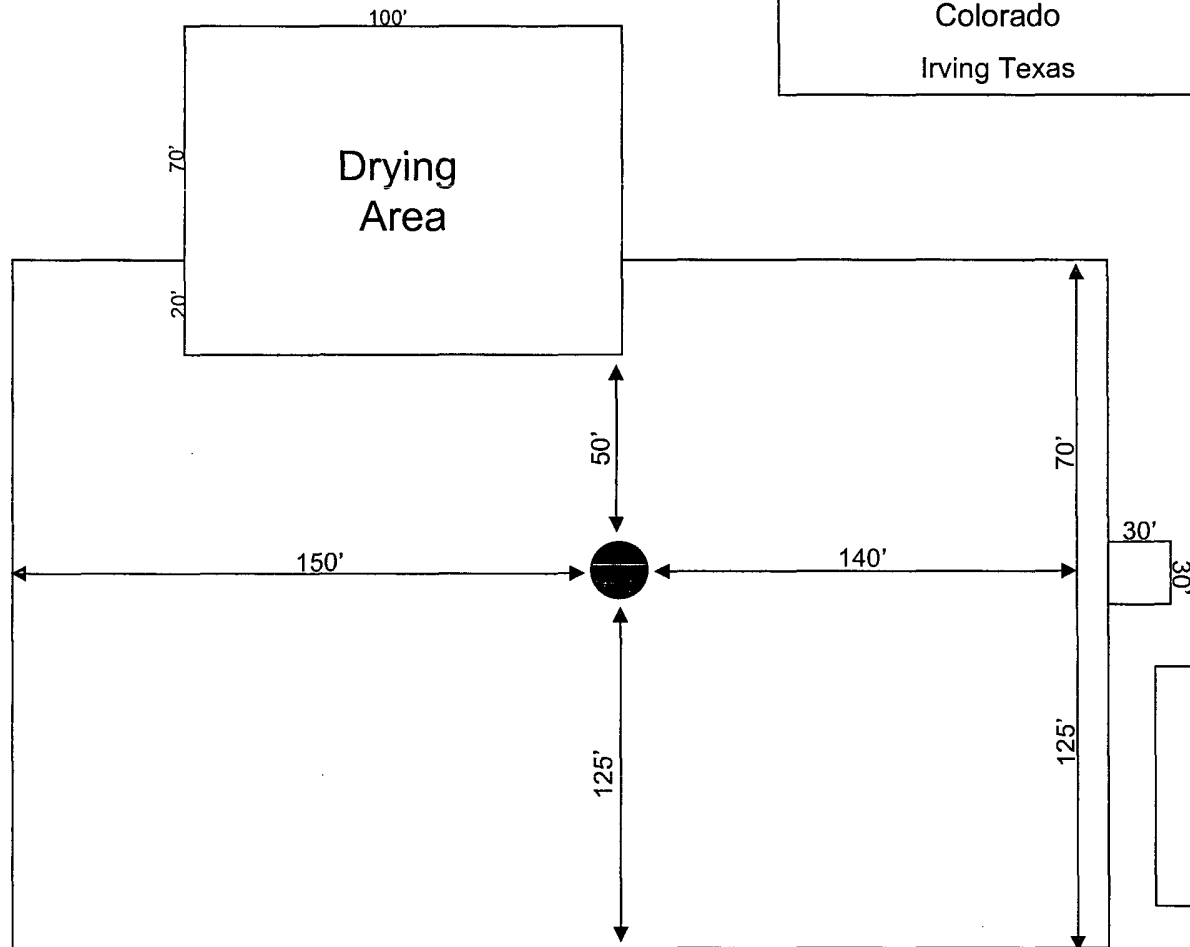


Exhibit D – Rig Layout  
**Pipeline B5 Federal No. 1**  
660' FNL & 1650' FEL  
Sec. 5-19S-34E  
Lea County, NM