

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-38513
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Harvard 6 FEE
8. Well Number 002
9. OGRID Number 215099
10. Pool name or Wildcat Denton Wolfcamp East

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"/>	
2. Name of Operator Cimarex Energy Co.	
3. Address of Operator PO Box 140907; Irving, TX 75014-0907	
4. Well Location SHL Unit Letter <u>D</u> : 430 feet from the <u>North</u> line and 430 feet from the <u>West</u> line Section <u>6</u> Township <u>15S</u> Range <u>38E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3792' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 Surf,Int <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

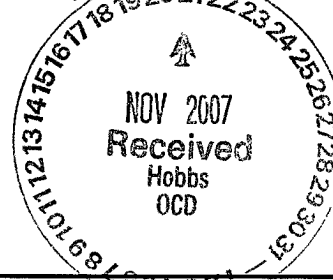
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10-16-07 Spudded 17-1/2" hole. Ran 632' 13-3/8" 48# H-40 STC . Cemented with lead of 290 sx Prem Plus (wt 12.5, yld 1.97) + 0.125# Poly-E-Flake + 1% CaCl and tail of 220 sx Premium Plus (wt 14.8, yld 1.34) + 2% CaCl, circ. 63 bbls to surface. WOC 17 hours.

10-17-07 Pressure tested 13-3/8" casing to 1000 psi for 30 minutes.

10-24-07 In 11" hole, ran 4572' 8-5/8" 32# J-55 LTC. Cemented with lead of 960 sx Interfill C (wt 11.9, yld 2.45) + 0.125 # Poly-E-Flake and tail of 200 sx Premium Plus (wt 14.8, yld 1.33) + 1% CaCl. Circulated 126 sx to pits. WOC 32 hours.

10-25-07 Pressure tested 8-5/8" casing to 1000 psi for 30 minutes.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Scott Haynes TITLE Reg Analyst DATE November 20, 2007

Type or print name Scott Haynes email address: shaynes@cimarex.com Telephone No. 469-420-2715

For State Use Only

APPROVED BY: Harry W. Wink TITLE OCD FIELD REPRESENTATIVE II/STAFF MANAGER DATE NOV 26 2007
Conditions of Approval (if any):