Form 3167-5 (.vovember 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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

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

5. Lease Serial No.

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6. If Indian, Allottee or Tribe Name

aband	7. If Unit	or CA/Agreement, Name and/or No.				
SUBMIT IN TRI	PLICATE - Other instructio	ns on reverse side		7	to overgreement, Name and/or No.	
Type of Well Oil Well Name of Operator Type of Well X Gas Well Type of Well X Gas Well Type of Calcumbates and Calcumbates	Pending 8. Well Name and No. Afton 24 Federal Com No. 1					
Cimarex Energy Co. of Colorado 3a. Address PO Box 140907; Irving, TX 7501	3b Phone No. (include 972-401-3111	de area code)	9. API Well No. 30-025- 3 8 388 10. Field and Pool, or Exploratory Area			
 Location of Well (Footage, Sec., T., R., M., 24-19S-33E 700' FSL & 1165' FEL 		Quail Ridge; Morrow (Gas) 11. County or Parish, State Lea County, NM				
12. CHECK APP TYPE OF SUBMISSION	ROPRIATE BOX(ES) T			E, REPOR	RT, OR OTHER DATA	
Notice of Intent Acidize Alter Casing X Subsequent Report Casing Repair		Deepen Fracture Treat New Construction	Production (Start	,	Water Shut-Off Well Integrity X Other set surface and	
Change Plans Convert to Injection		Plug and Abandon	Temporarily Abar Water Disposal	idon	intermediate casing	
and <u>tail</u> of 220 sx 08.29.07 Pressure tested 1 09.05.07 In 12-1/4" hole, ra 09.06.07 Cemented with <u>le</u>	ions. If the operation results in a miniment Notices shall be filed only af spection.) hole. H-40 STC to 1537.' ad of 930 sx Halliburton L Premium Plus C + 2% CaCl 3-3/8" casing to 1000 psi fan 9-5/8" 40# NS-110 LTC ad of 2000 sx Interfill C SE 1.32). Circulated 465 sx to	ite Premium Plus + 12 (wt 14.8, yld 1.34 for 30 minutes. to 5005. SM + 0.125# Ploy-e-o surface. WOC 27	pletion in a new interval ing reclamation, have be 1% CaCl2 + 0.125). Circulated 316	# Poly-e-flak sx to pit and 2.45) and tested 9-5/8	shall be filed once and the operator has see (wt 12.5, yld 1.98) d WOC 25 hours.	
14. I hereby certify that the foregoing is true and Name (Printed/Typed) Natalie Krueger Signature	Title OCD	malyst BUREAU OF LAND MA		AU OF LAND MANAGEMENT ARLSBAD FIELD OFFICE		
Wat ali Ku	eox	November 8	, 2007			
	// THIS SPACE FOR	FEDERAL OR STA	TE OFFICE USE			
Approved by			Title		Date	
Conditions of Approval, if any, are attached. certify that the applicant holds legal or equita which would entitle the applicant to conduct or	ble title to those rights in the subje		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

(Instructions on reverse)

fraudulent statements or representations as to any matter within its jurisdiction.