

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. 30-025-38624
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 Pennzoil B 36 State
8. Well Number 1007
9. OGRID Number 162683
10. Pool name or Wildcat Apache Ridge; Bone Spring

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator
Cimarex Energy Co. of Colorado

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

4. Well Location
SHL Unit Letter A : 930 feet from the North line and 660 feet from the East line
Section 36 Township 19S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3620' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

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 <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.

01-20-08 Spudded 17½" hole.

01-22-08 Ran 13¾" 48# H-40 STC casing to 1403.' Cemented with Lead 830 sx Halliburton Light Premium Plus + 1% CaCl₂ + 0.125# Poly-e-flake (wt 12.5, yld 1.97) and Tail 220 sx Premium Plus Class C + 2% CaCl₂ (wt 14.8, yld 1.34). Circulated 189 sx to surface. Pressure tested surface casing to 1000 psi for 30 minutes. WOC 21 hrs.

01-28-08 In 12¼" hole, ran 9¾" 40# & 53.5# P-110 BTC casing to 5241.' Cemented with First Lead 200 sx Thixotropic + 1% CaCl₂ (wt 14.2, yld 1.64) and Second Lead 1100 sx Interfill C (wt 11.5, yld 2.79) and Tail 200 sx Premium Plus + 1% CaCl₂ (wt 14.8, yld 1.33). Did not circulate cement to surface.

01-29-08 Ran temperature survey – TOC 3630.' One-inched to 3007' w/ 70 bbl Premium Plus + 2% CaCl₂ (wt 14.8, yld 1.35). One-inched w/ 60 bbl Premium Plus + 2% CaCl₂ (wt 14.8, yld 1.35). Tagged @ 2356.' One-inched w/ 1200 sx Premium Plus (wt 14.8, yld 1.32). One-inched w/ 150 sx Premium Plus + 2% CaCl₂ (wt 14.8, yld 1.35). One-inched w/ 690 sx Premium Plus (wt 14.8, yld 1.32). Circulated 10 sx to surface.

01-31-08 Ran CBL from 5130' to surface – TOC 0.' WOC 26 hrs. Pressure tested intermediate 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 Natalie Krueger TITLE Reg Analyst DATE May 12, 2008

Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 469-420-2723

For State Use Only

APPROVED BY: Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE MAY 27 2008

Conditions of Approval (if any):