

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED  
OMB NO. 1004-0135  
Expires January 31, 2004

**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.**

JUN 10 2008

HOBBS OCD

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>NM-04452</b>
2. Name of Operator <b>CIMAREX ENERGY CO. OF COLORADO</b>		6. If Indian, Allottee or Tribe Name
3a. Address <b>P.O. BOX 140907, IRVING, TEXAS 75014-0907</b>	3b. Phone No. (include area code) <b>972.443.6489</b>	7. If Unit or CA/Agreement, Name and/or No
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>UNIT LETTER P 660' FSL &amp; 990' FEL SEC. 27, T-19-S, R-34-E</b>		8. Well Name and No. <b>MALLON 27 FEDERAL #002</b>
		9. API Well No. <b>30-025-32653</b>
		10. Field and Pool, or Exploratory Area <b>NE LEA DELAWARE</b>
		11. County or Parish, State <b>LEA COUNTY NM</b>

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 type="checkbox"/> Change Plans	<input checked="" 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, including 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 final site is ready for final inspection.)

05/25/08: TAG EXISTING CIBP @ 6,000';CIRC. WELL W/ FXA MUD & MIX & PUMP A 25 SX. OMT. PLUG ON TOP OF CIBP

05/26/08: SET 5-1/2" CIBP @ 5,750'; MIX & PUMP A 25 SX. OMT. PLUG ON TOP OF CIBP; MIX & PUMP A 25 SX. OMT. PLUG @ 4,000'-3,860' (CALC.); MIX & PUMP A 25 SX. OMT. PLUG @ 3,365'; WOC & TAG TOP OF OMT. PLUG @ 3,190'; CUT 5-1/2" CSG. @ 2,075' - COULD NOT WORK FREE; PRES. UP ON CSG. CUT TO 1,500# & HELD PRES.; MIX & PUMP A 40 SX. OMT. PLUG @ 2,125'; WOC & TAG TOP OF OMT. PLUG @ 1,935'.

05/27/08: CUT 5-1/2" CSG. @ 1,885' - COULD NOT WORK FREE; PRES. UP ON CSG. CUT TO 1,500# & HELD PRES.; MIX & PUMP A 30 SX. OMT. PLUG @ 1,935'; WOC & TAG TOP OF OMT. PLUG @ 1702'; CUT 5-1/2" CSG. @ 1,564' - COULD NOT WORK CSG. FREE; PRES. UP ON CSG. CUT TO 1,500# & HELD PRES.; MIX & PUMP A 30 SX. OMT. PLUG @ 1,632'; WOC & TAG TOP OF OMT. PLUG @ 1,356'; PERF. SQZ. HOLES @ 350'; PRES.. UP ON SQZ. HOLES TO 1,500# & HELD PRES.; MIX & PUMP A 35 SX. OMT. PLUG @ 400'; WOC ON OMT. & TAG TOP OF OMT. PLUG @ 100'; PERF. SQZ. HLES @ 100'; PRES. UP ON SQZ. HOLES TO 1,500# & HELD PRES.; MIX & PUMP A 20 SX. OMT. PLUG @ 100'-3'; DIG OUT & CUT OFF WELLHEAD 3' B.G.L.; WELD STEEL PLATE ON CASINGS & INSTALL DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 05/27/08

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) <b>DAVID A. EYLER</b>		Title <b>AGENT</b>	<b>ACCEPTED FOR RECORD</b>  JUN 7 2008 <b>J. H. Davis</b>
Date <b>05/29/08</b>			
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>			
Approved by  <b>David A. Eyer</b>	Title  <b>KE</b>	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	

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.