

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <div style="font-size: 2em; opacity: 0.5; position: absolute; top: 0; left: 0;">RECEIVED</div> <div style="position: absolute; top: 0; left: 0;">MAR 18 2009</div> <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505	<b>Form C-105</b> Revised June 10, 2003 <hr/> WELL API NO. <b>30-025-38843</b> <hr/> 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> <hr/> State Oil & Gas Lease No.
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**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> OTHER _____  b. Type of Completion: NEW <input checked="" type="checkbox"/> WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF. WELL OVER BACK RESVR. <input type="checkbox"/> OTHER _____  2. Name of Operator <b>Cimarex Energy Co. of Colorado</b>  3. Address of Operator <b>5215 N. O'Connor Blvd., Ste 1500; Irving, TX 75039</b>  4. Well Location SHL: Unit Letter <u>J</u> : <u>2250</u> Feet From The <u>South</u> Line and <u>2110</u> Feet From The <u>East</u> Line Section <u>9</u> Township <u>15S</u> Range <u>36E</u> NMPM _____ County <u>Lea</u>  10. Date Spudded <u>09-27-08</u> 11. Date T.D. Reached <u>10-19-08</u> 12. Date Compl. (Ready to Prod.) _____ 13. Elevations (DF& RKB, RT, GR, etc.) <u>3910' GR</u> 14. Elev. Casinghead _____  15. Total Depth <u>10911'</u> 16. Plug Back T.D. <u>10911'</u> 17. If Multiple Compl. How Many Zones? _____ 18. Intervals Drilled By _____ Rotary Tools _____ Cable Tools _____ 19. Producing Interval(s), of this completion - Top, Bottom, Name _____ 20. Was Directional Survey Made _____  21. Type Electric and Other Logs Run <b>Sonic TLD MCFL CNL, Nuclear, Sonic, Spectral</b> 22. Was Well Cored <u>No</u>	7. Lease Name or Unit Agreement Name  <b>Caudill East 9 Fee</b>  8. Well No. <b>001</b>  9. Pool name or Wildcat
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23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13%	48	642	17½	500 sx	
8%	32	4500	11	1230 sx	
5½	17	10901	7%	1000 sx	

24. LINER RECORD					25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number)	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">DEPTH INTERVAL</th> <th style="width:70%;">AMOUNT AND KIND MATERIAL USED</th> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED						
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28. PRODUCTION							
Date First Production		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> )			Well Status ( <i>Prod. or Shut-in</i> ) <b>Shut in for evaluation</b>		
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24 Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)	

29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> )	Test Witnessed By
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30. List Attachments <b>Deviation Report</b>
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31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
Signature <u>Natalie Krueger</u>	Printed Name <u>Natalie Krueger</u>	Title <u>Reg Analyst</u>	Date <u>March 17, 2009</u>
E-mail Address: <u>nkrueger@cimarex.com</u>			

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	T. Devonian	T. Menefee	T. Madison
T. Queen	T. Silurian	T. Point Lookout	T. Elbert
T. Delaware	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Otzte
T. Glorieta	T. McKee	B. Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinbry 6832	T. Gr. Wash	T. Morrison	T.
T. Tubb 7398	T. Delaware	T. Todilto	T.
T. Drinkard	T. Bone Spring	T. Entrada	T.
T. Abo Shale 8140	T. Morrow	T. Wingate	T.
T. Wolfcamp 9743	T. SBSS	T. Chinle	T.
T. Penn	T. Barnett	T. Permian	T.
T. Cisco (Bough C)	T. Rustler	T. Penn "A"	T.

## OIL OR GAS SANDS OR ZONES

No. 3, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology