

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

May 27, 2004

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HOBBSOCD

## CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-27417

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name

State HH

8. Well Number

001

9. OGRID Number

162683

10. Pool name or Wildcat

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

600 N. Marienfeld, Ste. 600; Midland, TX 79701

4. Well Location

SHL Unit Letter H : 1980 feet from the North line and 660 feet from the East line

Section 36 Township 19S Range 32E NMPM County Lea

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

3582 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: Request Permit Extension ☒

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐

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.

The horizontal recompletion permit for this well is due to expire 04-08-11. Cimarex respectfully requests an extension due to rig scheduling.

APD Expires 04-08-12

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 Regulatory Analyst DATE March 2, 2011Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 432-620-1936

## For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE MAR 04 2011

Conditions of Approval (if any):