Form 3160-5 (August 2007)		TED STATES IT OF THE INTERI	or REC	EVE	FORM APPROV OMB NO. 1004-0	137
	BUREAU OF L	AND MANAGEM	ENT		Expires July 31, 2 5. Lease Serial No. Contact No. 189	
Do aban	not use this form for p doned well. Use Form	proposals to drill a 3160-3 (APD) fo				Name
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or N	
 Type of Well X Oil Well Gas W Name of Operator Energen Resources 3a. Address 2010 Afton Place. 	3b. Phone No. (<i>include ar</i> (505) 325-680	ea code) Q	 8. Well Name and No. Chacon Jicarilla D1 9. API Well No. 30-039-21145 10. Field and Pool, or Exploratory Area 			
4. Location of Well <i>(Footage</i> 1020' FSL 1720' F	Sec., T., R., M., or Survey D EL, Sec. 15, T. 23N				West Lindrith Gallu 11. County or Parish, State Rio Arriba	p Dakota
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REP					RT, OR OTHER DATA	
TYPE OF SU	TYPE OF SUBMISSION TYPE OF A					
X Notice of Ir		Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Production (Reclamation X Recomplete		
Final Aband	Ionment Notice	Change Plans	Plug and Abandon Plug Back	Temporarily		
If the proposal is to de Attach the Bond under following completion of testing has been comp determined that the fin Energen Resource perfs are from perforations ar	epen directionally or recomple- which the work will be perfort the involved operations. If leted. Final Abandonment N al site is ready for final inspec- res would like to re 7248'-7290' & 7366' re 6270'-6452' at 3	ete horizontally, give s ormed or provide the l the operation results i otices shall be filed or tion.) ecomplete the e -7380' at 2spf spf. A CBL wil	ubsurface locations and mea Sond No. on file with BLM/ n a multiple completion or m ly after all requirements, in xisiting West Lind , and the estimate 1 be run from arout	sured and true vert 'BIA. Required sul ecompletion in a ne cluding reclamation rith Gallup [d new nd 7200' to s	posed work and approximate c ical depths of all pertiment main bequent reports shall be filed ew interval, a Form 3160-4 sha n, have been completed, and the Dakota pool. The exi surface to 11 production from a	rkers and zone within 30 day all be filed ond he operator has sting
					RCVD APR 2 *	13
			•		OIL CONS. DI DIST. 3	
* submit	COL For AG	ENICIISI REU	usu prin	t pert		
14. I hereby certify that the f Name (Printed/Typed)	oregoing is true and correct		Title Distri	ct Engineer		
Adam Klem Signature		<u>_</u>	Date 3/27/13	ct_Engineer	· · · · · · · · · · · · · · · · · · ·	`
	THIS	SPACE FOR FEL	DERAL OR STATE OF	FICE USE		
Approved by			Title	······	Dat APR U	2013
Conditions of approval, if any, a	ginal Signed: Stephen l e attached. Approval of this notic able title to those rights in the sub perations thereon.	ce does not warrant or cer	lify that Office			
Title 18 U.S.C. Section 1001, an			rson knowingly and willfully to	make to any departme	ent or agency of the United States a	ıny false,

NMOCD~