

RECEIVED

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

JUL 05 2013

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry Other ☐ **Bureau of Land Management**

b. Type of Completion: ☐ New Well ☒ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resrv.,
Other ☐ **Recomplete/Additional perfs**

2. Name of Operator

ENERGEN RESOURCES CORPORATION

3. Address

2010 Afton Place, Farmington, NM 87401

3a. Phone No. (include area code)

505-325-6800

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface 1777' FSL, 980' FEL Sec 16, T23N, R03W (I) NE/SE

At top prod. interval reported below

At total depth

14. Date Spudded

15. Date T.D. Reached

16. Date Completed

☐ D & A

☒ Ready to Prod.

11/4/75

11/22/75

6/14/13

18. Total Depth: MD
TVI

7744'

19. Plug Back T.D.: MD
TVI

7697'

20. Depth Bridge Plug Set:	MD TVD
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21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

CBL

22. Was well cored?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes (Submit analysis)
Was DST run	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes (Submit report
Directional Survey?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

[illegible]

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-3/8"	7521'							

25. Producing Intervals

26 Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) West Lindrith Gallup	6228'	7256'	6320'-6337', 6368'-	0.29"	162	3 spf
B) Dakota			6384', 6408'-6429'			
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
6320'-6337', 6368'-6384', 6408'-6429'	1000 gal 15% HCl acid, 22569 gals of Delta 200, 1127041 scf of N2, 5000# of 100 mesh & 75120# of 20/40 PW

28. Production - Interval A

Date First Produced 7/03/13	Test Date 6/25/13	Hours Tested 1	Test Production →	Oil BBL Trace	Gas MCF 0	Water BBL 0	Oil Gravity Corr. API	Gas Gravity	Production Method Flowing
Choke Size 16/64"	Tbg. Press. Flwg. SI 0	Csg. Press. 50	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

28a. Production-Interval B

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	<div>ACCEPTED FOR RECORD</div> <div>JUL 08 2013</div> <div>FARMINGTON, CT</div>

(See instructions and spaces for additional data on page 2)

NMOCDA

BY William Tamborek

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

28c. Production-Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

to be sold

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
				Chacra	3952' MD 3952' TVD
				Cliff House	4663' MD 4663' TVD
				Manefee	4686' MD 4686' TVD
				Point Lookout	5220' MD 5220' TVD
				Gallup	6228' MD 6228' TVD
				Greenhorn	7257' MD 7257' TVD
				Dakota	7330' MD 7330' TVD
				Morrison	7715' MD 7715' TVD

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd)
 ☐ Geologic Report
 ☐ DST Report
 ☐ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Anna StottsTitle Regulatory Analyst

Signature

Anna StottsDate 7/03/13

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.