

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

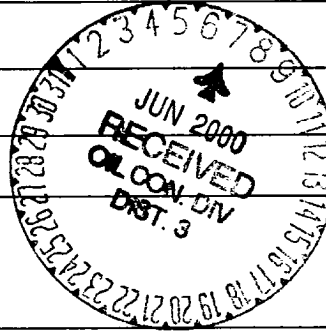
SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
ENERGEN RESOURCES CORPORATION

3. Address and Telephone No.
2198 Bloomfield Highway, Farmington, NM 87401

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
900' FNL, 990' FEL, Sec. 6, T26N, R5W, N.M.P.M.



5. Lease Designation and Serial No.
Jic Cont 152

6. If Indian, Allottee or Tribe Name
Jicarilla Apache

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Jicarilla West 8

9. API Well No.
30-039-06729

10. Field and Pool, or exploratory Area
Blanco MV/Basin DK

11. County or Parish, State
Rio Arriba NM

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

| TYPE OF SUBMISSION | TYPE OF ACTION | |
|---|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other <u>Downhole Commingle</u> | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This well was downhole commingled in accordance with NMOCD Administrative Order DHC-2396.
3/16/00 MIRU.
3/17/00 TOH laying down 161 jts. 1 1/4" 2.4# tubing.
3/20-4/16 Fished 1 1/4" tubing and cut over Model "D" packer. Recovered 100% fish and packer.
4/17/00 TIH with 2 3/8" production tubing. Changed out wellhead.
4/18/00 Ran notched collar, 1 jt. 2 3/8" tubing, seat nipple, 236 jts. 2 3/8" 4.7# J-55 tubing, set at 7499. RDMO.

DHC-2396

RECEIVED
BLM
00 MAY -1 AM 11:24
010 ALBUQUERQUE, N.M.

14. I hereby certify that the foregoing is true and correct

Signed Monica Papp Title Production Assistant Date 4/28/00

(This space for Federal or State office use)

Approved by [Signature] Title [Signature] Date 6/12/00

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes 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.

* See Instruction on Reverse Side