Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000

5. Lease Serial No.

NMSF 079488

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

6. If Indian, Allottee or Tribe Name

abandoned well. Use For	m 3160-3 (APD) for such	proposals.	<u> </u>	_			
SUBMIT IN TRIPLICATE - Other Instructions on reverse lide 25 M 10				7. If Unit or CA/Agreement, Name and/or N San Juan 30-4 Unit			
Type of Well Oil Well	JUL 2002	(010 M3	mator, n	8. Well Nam San Juan	ne and No. 30-4 Unit 3	 3B	
Energen Resources Corporation				9. API Well	No.		
3a. Address	3b. Phone No. (include area code)			30-039-26655			
2198 Bloomfield Highway, Farmington		<u> 505-325-6800</u>			d Pool, or Explora	atory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey	 National Matter Street (1997) 	e ^r		Blanco Me	esaverde		
1725' FNL, 1710' FWL, Sec. 31, T30	N, RUAW, M. P. M.			11 County	or Parish State		
					11. County or Parish, State Rio Arriba NM		
12. CHECK APPROPRIATE	DOV(EQ) TO INDICAT	E NATURE OF N	IOTICE DED			NPI	
	BOX(ES) TO INDICAT		PE OF ACTION		THER DATA		
TYPE OF SUBMISSION							
X Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shu	ut-Off	
	Alter Casing	Fracture Treat	Reclamatio	n	Well Integr	rity	
Subsequent Report		New Construction	Recomplete		Other	,	
	Casing Repair	_			Onler		
Final Abandonment Notice	X Change Plans	☐ Plug and Abandon	Temporaril	-			
	Convert to Injection	Plug Back	Water Disp	osal			
Due to the difficulty of getting intended to preform a 2 stage cem Set 7" stage collar at 3800' TD-4 Cement 1St stage with 150 sx 50/5 CFR-3 (197 cu ft)50% excess volum Cement 2nd stage with 405 sx 65/3 50/50 Poz,2% gel, 5# gilsonite/sx circulate to surface.	a cement job on the ment job as follows: 1675' 50 Poz, 2% gel, 5# gi me 85/poz, 6% gel, 10# g k, 1/4# Flocele/sx, 0	intermediate of lsonite/sx, 1, gilsonite/sx, 1	casing strin /4# flocele/ 1/2# Flocele	g in this sx, 0.5%	s area, It i Halad-9, 0.3	s 2% x	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)		Title					
Vicki Donaghey		Produc	tion Assista	ant			
Vicke Dragton		Date 07/24/02	2				
() THI	S PACE FOR FEDERA	L OR STATE OF	FICE USE				
Approved by /s/ Jim Lovalo		Title	- -		Date JUL 2	9 2002	
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations t	those rights in the subject lea	or Office				<u> </u>	