

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

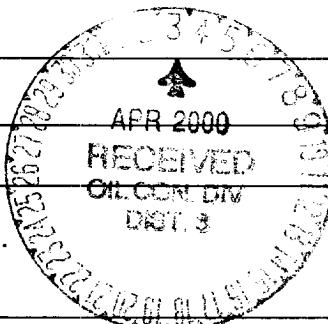
SUNDRY NOTICES AND REPORTS ON WELLS

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)
2330' FSL, 1048' FEL, Sec. 30, T32N, R5W, N.M.P.M.



5. Lease Designation and Serial No.

NM-02850-B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

San Juan 32-5 Unit

8. Well Name and No.

San Juan 32-5 Unit 9M

9. API Well No.

30-039-25879

10. Field and Pool, or exploratory Area

Basin Dakota

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

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☒ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☐ Other
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ 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.)*

It is intended to plug back this wellbore to the Mesaverde as follows:

1. MIRU. TOH.
2. Set CIBP at 8000'. TIH and cap CIBP with 10 sks cement. TOH.
3. Test casing to 3000 psi.
4. Selectively perforate and fracture treat Mesaverde.
5. TIH and clean out with air mist. Land tubing at bottom perforation. Return to production.

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

Signed Monica Papp Title Production Assistant Date 3/16/00

(This space for Federal or State office use)

Approved by /s/ Charlie Beasom Title _____ Date _____

Conditions of approval, if any: