

# OIL CONSERVATION DIVISION

**DISTRICT I**  
P.O. Box 1980, Hobbs NM 88241-1980

**DISTRICT II**  
P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-039-26214

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name  
Eul Canyon SWD

1. Type of Well:  
OIL WELL ☐ GAS WELL ☐ OTHER SWD

8. Well No.  
1

2. Name of Operator  
ENERGEN RESOURCES CORPORATION

3. Address of Operator  
2198 Bloomfield Highway, Farmington, NM 87401

9. Pool name or Wildcat  
Entrada/Chinle

4. Well Location  
Unit Letter M : 1105 Feet From The South Line and 780 Feet From The West Line  
Section 24 Township 32N Range 6W NMPM Rio Arriba County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
6346 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☒  
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

10/31/99 Drilled to 9235'. Ran 89 jts 5 1/2" 17# K-55 and N-80 casing 3647'. Set at 9233'. Top of liner at 5585'. Cemented with 665 sks 50/50 Class H poz, 2% gel, 5#/sk gilsonite, 1/4#/sk flocele 0.4% Halad-433, 35% SSA-1, 0.2% SCR-100 followed by 250 sks Class H, 5#/sk gilsonite, 1/4#/sk flocele, 0.4% Halad-413, 35% SSA-1, 0.2% SCR-100 and 0.2% CFR-3. (1512 cu. ft.) Plug down 11:30 pm 11/1/99. Circ. 150 sks cement of top of liner.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Monica Papp TITLE Production Assistant DATE 11/4/99

TYPE OR PRINT NAME Monica Papp TELEPHONE NO. 505-325-6800

(This space for State Use)

ORIGINAL SIGNED BY CHARLIE T. PERMAN

DEPUTY OIL & GAS INSPECTOR, DIST. 3

NOV 5 1999

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: