Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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

6. If Indian, Allottee or Tribe Name

5. Lease Serial No.

NMSF - 079011

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

		4 3	M = e J				
SUBMIT IN TRIPLICATE -	Other instructions	s on reverse side			A/Agreement, Nar 32-5 Unit	ne and/or No	
Type of Well Oil Well X Gas Well Other Name of Operator					8. Well Name and No. San Juan 32-5 Unit 6C		
ENERGEN RESOURCES CORPORATION		:		9. API Well N			
. Address 3b. Phone No. (include area code)				30-039-26622			
2198 Bloomfield Highway, Farmington	505-325-6800		10. Field and Pool, or Exploratory Area				
Location of Well (Footage, Sec., T., R., M., or Survey I	• •			Blanco Mes	averde		
1535' FNL, 275' FWL, Sec. 25, T32	N, R6W, N.M.P.M			11. County or			
				Rio Arriba		1	
12. CHECK APPROPRIATE	BOX(ES) TO INI	DICATE NATURE OF N	NOTICE, REP	ORT, OR OTI			
TYPE OF SUBMISSION		TYF	E OF ACTION				
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production Reclamation	(Start/Resume)	Water Shut-C		
X Subsequent Report	Casing Repair	New Construction	Recomple		X Other set		
Final Abandonment Notice	Change Plans Convert to Injecti	Plug and Abandon Plug Back	Temporari Water Dis	ly Abandon oosal			
following completion of the involved operations. It testing has been completed. Final Abandonment Metermined that the final site is ready for final inspector. O9/08/01 TD: 6104'. Ran 66 jts Halliburton. Cement with 300 sks 0.1% HR-5 (396 cu.ft.). Plug dow Halliburton. ND BOP. Rig releas	Notices shall be filed on ction.) 4-1/2" 10.5# J- 5 50/50 Class B IN @ 1:50 am 09/	55 ST&C casing, set poz, 2% gel, 1/4#/s	bluding reclamation t @ 6103'. sk flocele, 75 sks cemen	TOL: 3523' 0.5% Halad	. RU -9, 0.2% CFR 523'. RD	operator has	
		·					
4. I hereby certify that the foregoing is true and correct Name (Printed Typed) Vicki Donaghey		Title Produc	tion Assist	ant.			
Vicki Donagher		Date 09/14/01					
	S SPACE FOR FEI	DERAL OR STATE OF	FICE USE				
Approved by		Title		D	ate		
Conditions of approval, if any, are attached. Approval of ertify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to	those rights in the sul	warrant or Office oject lease		ACCEPTE	<u> 7 </u>	ORL_	
Citle 19 II C C Section 1001 and Title 42 II C C Section	am 1010 mentena it a amim	an for any many and a least state of	and willfuller to	also to any doman	tmant or ogeneric	otha United	