

District I  
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Phone:(505) 393-6161 Fax:(505) 393-0720  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
Phone:(505) 748-1283 Fax:(505) 748-9720  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
District IV  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Permit 33221

|                                                                                                                                                                                                                                                                                                                                         |  |                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)                                                                                                                                  |  | WELL API NUMBER<br>30-025-37530                                    |
| 1. Type of Well: <input type="checkbox"/>                                                                                                                                                                                                                                                                                               |  | 5. Indicate Type of Lease<br>P                                     |
| 2. Name of Operator<br>ENERGEN RESOURCES CORPORATION                                                                                                                                                                                                                                                                                    |  | 6. State Oil & Gas Lease No.                                       |
| 3. Address of Operator<br>605 21ST STREET NORTH , BIRMINGHAM , AL 352032707                                                                                                                                                                                                                                                             |  | 7. Lease Name or Unit Agreement Name<br>WEST LOVINGTON STRAWN UNIT |
| 4. Well Location<br>Unit Letter I : 2310 feet from the S line and 660 feet from the E line<br>Section 32 Township 15S Range 35E NMPM Lea County                                                                                                                                                                                         |  | 8. Well Number<br>022                                              |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3990 GR.                                                                                                                                                                                                                                                                           |  | 9. OGRID Number<br>162928                                          |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ |  |                                                                    |

|                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                            |
| NOTICE OF INTENTION TO:<br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>Other: | SUBSEQUENT REPORT OF:<br>REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>Other: <b>Perforations/Tubing</b> <input checked="" type="checkbox"/> |

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  
6/7/06 - Ran CBL/VDL/CMT/GR/CCL from the WL PBTD of 11,586' to 4500'.  
6/21 - 6/24/06 - Perforated Strawn w/ 4" EXP guns loaded w/3-25.0 gram, Titan 120 degree phased JSPF from 11,558-11,590' for a total of 96 holes. RIH 5-1/2" Arrow-Set 1X packer & 363 jts of 2-3/8" L-80 tubing down to 11,519'. Packer setting depth is 11,509' w/profile nipple @ 11,500'. Acidized Strawn w/5M gals of 15% HCL/DI acid w/lab tested additives & 200-1.3 SG/RCN ball sealers. Recovered 60 BF in 7 hours The last hour, made 2 runs, recovered 8 BF/hr w/a 5-7% oil-cut & fair blow of gas. Will continue swabbing.

### Perforations

Pool: LOVINGTON;STRAWN, WEST , 40875 Location: I -32-15S-35E 2310 S 660 E

| TOP   | BOT   | Open Hole | Shots/ft | Shot Size | Material | Stimulation | Amount |
|-------|-------|-----------|----------|-----------|----------|-------------|--------|
| 11558 | 11590 | N         | 3        | 0.49      |          | Acid        | 5000   |

### Tubing

LOVINGTON;STRAWN, WEST , 40875

| Tubing Size | Type   | Depth Set | Packer Set |
|-------------|--------|-----------|------------|
| 2.375       | L/N-80 | 11509     | 11509      |

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐ .

SIGNATURE Electronically Signed TITLE Production Assistant DATE 7/17/2006

Type or print name Vicki Donaghey E-mail address vdonaghe@energen.com Telephone No. 505-325-6800

For State Use Only:

APPROVED BY: Paul Kautz TITLE Geologist DATE 7/19/2006 10:41:18 AM

### Tubing Comments

OGRID: [162928] ENERGEN RESOURCES CORPORATION

Permit Number: 33221

Permit Type: Tubing

| Created By | Comment                                                                                                                                                                                                                        | Comment Date |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DMULL      | OCD requires the formation tops. This information is required before we can approved this. If you have questions on this matter, please call Donna Mull (505) 393-6161 ext 115. At this time OCD Hobbs is rejecting this form. | 6/29/2006    |