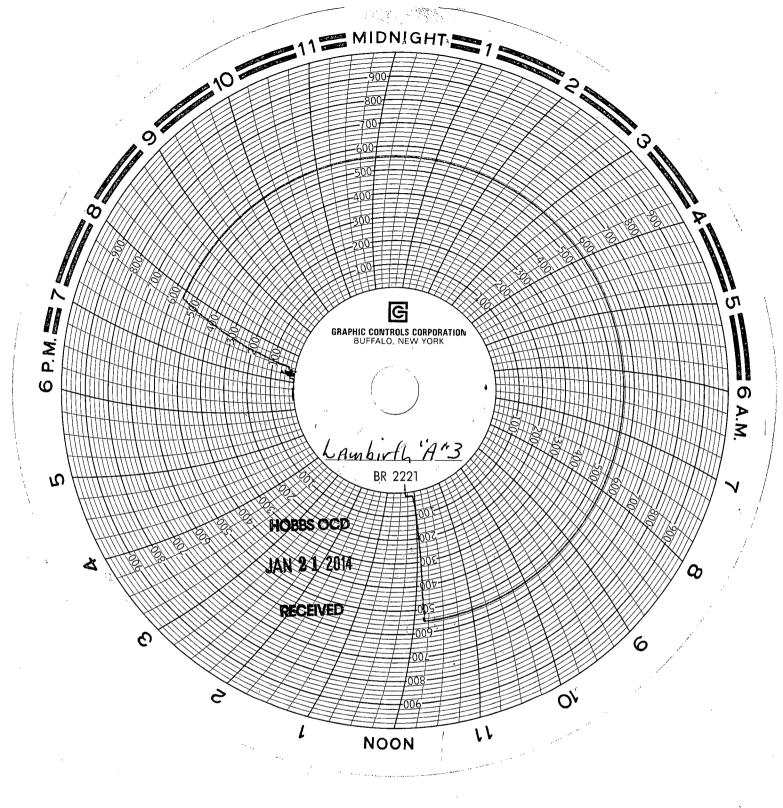
Submit 3 Copies To Appropriate District Office District I  State of New Mexico Energy, Minerals and Natural Resources	Form C-103 / June 19, 2008
1625 N. French Dr., Hobbs, NM 87240	WELL API NO.
District II  1301 W. Grand Ave., Artesia, NM 88210  OIL CONSERVATION DIVISION  1220 Searth St. Francis De	30-041-20484 5. Indicate Type of Lease
1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV  1320 S. St. Francis Dr. Sonta Fe, NM  1320 S. St. Francis Dr. Sonta Fe, NM	STATE FEE X
	6. State Oil & Gas Lease No.
87505 IAN 9 1 2014	24194
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 SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name:  Lambirth A
1. Type of Well: Oil Well  Gas Well  Other	8. Well Number
2. Name of Operator	9. OGRID Number
Energen Resources Corporation	162928
3. Address of Operator	10. Pool name or Wildcat
3300 N. "A" St., Bldq 4, Ste. 100, Midland, TX 79705 4. Well Location	Peterson; Fusselman, South
Unit Letter N : 760 feet from the South line and	
Section 31 Township 5-S Range 33-E	NMPM County Roosevelt
11. Elevation (Show whether DR, RKB, RT, GR, e	/
4425' GR 4440' DF	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUE	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	
PULL OR ALTER CASING	<u> </u>
DOWNHOLE COMMINGLE	
DOWNHOLE COMMINGLE	,
OTHER: OTHER: MITT	<u> </u>
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.	
01/13/2014	
Desificant NEW form outcomes on of III) observe	
Perform MIT for extension of TA status.	Temporary 1 /13/2015
This Approval of Temporary   13 2015 Abandenment Expires	
Abangemment	T.
	<del></del>
Spud Date: Rig Release Date:	
Tag Telease Bate.	
hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.
SIGNATURE Brenda Hacty's TITLE Regulatory Analyst DATE 01/17/2014	
Type or print name Brenda F. Rathjen E-mail address: PHONE 432-688-3323	
For State Use Only M. A.	
APPROVED BY MANUEL STOWN TITLE COMPLE	INCE OFFICEDATE 1/23/2014
Conditions of Approval (if any):	JAN 27 2014



1-13-14

The clock

The clock

The clock

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The spring

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