

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources
HOBBS OGD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
JAN 22 2014

Form C-103
June 19, 2008

RECEIVED	
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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-025-34645
2. Name of Operator Energen Resources Corporation	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>D</u> : <u>655</u> feet from the <u>North</u> line and <u>330</u> feet from the <u>West</u> line Section <u>5</u> Township <u>16S</u> Range <u>36E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit
	8. Well Number 18
	9. OGRID Number 162928
	10. Pool name or Wildcat Lovington; Strawn, West
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: MIT ☒

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.

MIT request to extend TA status.

Thank you-

Failed MIT TEST
MRS

Spud Date:

Rig Release Date:

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

SIGNATURE Brenda Rathjen TITLE Regulatory Analyst DATE 01/22/2014
brenda.rathjen@energen.com
Type or print name Brenda F Rathjen E-mail address: brenda.rathjen@energen.com PHONE 432-688-3323

For State Use Only

Accepted for Record Only

APPROVED BY _____ TITLE _____ DATE JAN 28 2014
Conditions of Approval (if any):

JAN 28 2014