Submit 3 Copies To Appropriate District Office	State of New Mo Energy, Minerals and Natu		Form C-103 June 19, 2008
District 1 1625 N. French Dr., Hobbs, NM 87240			WELL API NO.
District II	OIL CONSERVATION	N DIVISION	30-025-37846
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fra	ancis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	7505	STATE FEE X
1220 S. St. Francis Dr., Santa Fe, NM 87505			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: West Lovington Strawn Unit
1. Type of Well: Oil Well 🔀 Gas Well 🗌 Other			8. Well Number 23
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			Lovington: Strawn, West
Unit Letter O:	660 feet from the Sou	ith line and	2310 feet from the East line
S	Transaction was	D	NA CONTRACTOR OF THE CONTRACTO
Section 34	11. Elevation (Show whether	Range 35E DR, RKB, RT, GR, etc.	NMPM County Lea
12. Check A	ppropriate Box to Indicate		Report, or Other Data
		1	
NOTICE OF INTENTION TO: SUB:			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			☐ ALTERING CASING ☐
TEMPORARILY ABANDON X	CHANGE PLANS	COMMENCE DRILLI	ING OPNS. P AND A
PULL OR ALTER CASING			ов П
DOWNHOLE COMMINGLE	WOLTH EL COMP E	O'NONTO OCIMENTO	
	•		
OTHER: Approu	Byr TA	OTHER: on	
		- · · · · · · · · · · · · · · · · · · ·	ve pertinent dates, including estimated date a wellbore diagram of proposed completion
	11. ND tubing hangar, NU 1 f) and dump bail 20' cement		
	,(C.O.A.SURMIT	WELLBORE DIAGRAM
Thank you.		· -	VELLBORE DIAGRAM
Similar Marie Mari	Condition of Appro	•	
	OCD Hobbs office		
F	prior of running MIT	Test & Chart	·····
Spud Date:	Rig Relea	se Date:	
hereby certify that the information	boye is true and complete to the	best of my knowledge	e and belief.
SIGNATURE Brenda Fr	artyl TITI	E Regulator	DATE 10/03/2014
Type or print name Brenda F. Rat	h jen E-m	brenda.rathjen@ail address:	PHONE <u>432-688-3323</u>
For State Use Only			
APPROVED BY Delle Somanah TITLE Staff Manager DATE 10/7/2014			
Conditions of Approval (if any):	FOR KE	JUNU VIILI	OCT 1 4 2014
			UC 1 4 2014