

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

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

Form C-103  
Revised July 18, 2013

WELL API NO. 30-025-32291
5. Indicate Type of Lease STATE FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 27820
7. Lease Name or Unit Agreement Name West Lovington Strawn Unit
8. Well Number 8
9. OGRID Number 162928
10. Pool name or Wildcat [40875] LOVINGTON;STRAWN, WEST

**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 ☐ Gas Well ☐ Other ☐ Injection

2. Name of Operator  
Energen Resources Corporation

3. Address of Operator  
3510 N. A St., Bldgs A & B Midland TX 79705

4. Well Location  
Unit Letter L : 1980 feet from the SOUTH line and 660 feet from the WEST line  
Section 34 Township 15S Range 35E NMPM County LEA  
11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3970

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 ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: MIT-Bradenhead after well work ☐

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

8/18/17 MIRU well service rig. SIFWE  
8/21/17 Rls pkr. POOH 2-7/8" tbg.  
8/24/17 RIH w/ new 2-7/8" J55 & L80 tbg.  
Got hung up. POOH tbg and RIH w/ workstring.  
8/27/17 Clean out hole  
8/28/17 RIH 2-7/8" tbg. Set packer @ 11,457'.  
8/30/17 RAN MIT and BRADENHEAD. OCD Mr. Bower present.  
MOL

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 F Rathjen TITLE Regulatory Analyst DATE 1/10/2018

Type or print name Brenda F Rathjen E-mail address: Brenda.rathjen@energen.com PHONE: 432-688-3323

For State Use Only

APPROVED BY: Maley Brown TITLE AO/II DATE 1/11/2018  
Conditions of Approval (if any):

RBDMS - CHART - ✓

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>Energen Resources Corporation</i>	*API Number <i>30-025 32291</i>
Property Name <i>West Lovington Strawn Unit</i>	Well No. <i>8</i>

Surface Location

UL - Lot <i>2</i>	Section <i>34</i>	Township <i>15S</i>	Range <i>35E</i>	Feet from <i>1980</i>	N/S Line <i>5</i>	Feet From <i>660</i>	E/W Line <i>W</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES <input type="radio"/> NO <input checked="" type="radio"/>	SHUT-IN YES <input checked="" type="radio"/> NO <input type="radio"/>	INJECTOR INJ <input checked="" type="radio"/> SWD <input type="radio"/>	PRODUCER OIL <input type="radio"/> GAS <input type="radio"/>	DATE <i>8/30/17</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	$\phi$	$\phi$	—	$\phi$	$\phi$
Flow Characteristics					
Pull	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	CO2 —
Steady Flow	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	WTR —
Surges	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	GAS —
Down to nothing	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	Type of Fluid
Gas or Oil	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	Injected for
Water	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>	Y/N	Y/N <input checked="" type="radio"/>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Brenda Rathjen</i> <i>9/13/17</i>	OIL CONSERVATION DIVISION
Printed name: <i>Brenda F. Rathjen</i>	Entered into RBDMS
Title: <i>Regulatory Analyst Energen Resources Corporation</i>	Re-test
E-mail Address: <i>brenda.rathjen@energen.com</i>	
Date: <i>8/30/17</i>	
Phone:	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM



