

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

ENERGEN RESOURCES CORPORATION

3a. Address

2198 Bloomfield Highway, Farmington, NM 87401

3b. Phone No. (include area code)

SEP 2006

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

790' ENL, 1208' FWL, Sec. 7, T26N, R3W, N.M.P.M.

5. Lease Serial No.

Jicarilla 97

6. If Indian, Allottee or Tribe Name

Jicarilla Apache

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Jicarilla 97 #4

9. API Well No.

30-039-06639

10. Field and Pool, or Exploratory Area

Tapacito Pictured Cliffs

11. County or Parish, State

Rio Arriba NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input checked="" type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

It is intended to repair the casing on the Jicarilla 97 #4 as follows:

1. MIRU. ND wellhead. NU BOP.
2. TOH with tubing string.
3. PU work string and TIH with a 4.50" RBP & a 4.50" retrievable service packer, verify leak location and confirm casing integrity above the perforations - only pressure to 500 psig. (If leak is found, pump at rate and pressure as practical to determine if squeeze holes need to be shot).
4. Design of cement squeeze to be prepared after verification of leak location and injection test will depend on leak amount, location and if squeeze holes have to be shot - squeeze pressure as practical for the situation.
5. TIH with a 3.75" bit and scraper, drill out cement to within location of the RBP - pressure test the casing to 500 psig for 15 minutes. If squeeze holds, proceed below. If not notify office with pump-in results.
6. POH and ID BHA. TIH w/retrieving head for RBP, wash sand off of RBP and retrieve. TOH & lay down RBP.
7. TIH with a bit & scraper and clean out with air to PBID. TOH.
8. TIH with tubing & BHA per Production Foreman specifications.
9. ND BOP. NU WH. (Change out WH if needed).

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

Vicki Donaghey

Title

Regulatory Analyst

Date

09/06/06

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD BY