## State of New Mexico

Submit 3 Copies	Energy, Minerals and Natural R		Form C-103		
to Appropriate District Office	Elicity, Willicials and Waldran IV		Rev	ised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATIO	1	WELL API NO.		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe. NM 87505		30-	045-25334 of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	gant at the	(4) 31 1 2 2	6. State Oil & Ga	STATE └─ is Lease No.	FEE X
	TOTO AND DEPOSTS ON WEL		VX////////////////////////////////////	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE	TICES AND REPORTS ON WELL OPOSALS TO DRILL OR TO DEEPEN PROVING TO BE TAPPLICATION FOR PER 101) FOR SUCH PROPOSALS.)	MEP US BACK TO ALS	Lease Name o	r Unit Agreement	Name
1. Type of Well: OIL GAS W	<u>.</u> . 'a	AUU	-n-C		
WELL GAS WELL X	OTHER	AN COM D	W <sub>o</sub>		
2. Name of Operator ENERGEN RESOURCES CORPORATI	ON (0	DIM. 3	8. Well No. 12A		
3. Address of Operator 2198 Bloomfield Highway, Fa	rmington, NM 87401		9. Pool name or Aztec PC/Bla		
4. Well Location	0 Nonth		n		ast tine
Unit Letter A : 101	O Feet From The North	Line and900	Feet Fro	m TheE	Line
Section 12	Township 30N R	ange 12W	NMPM	San Juan	County
Section 12	10. Elevation (Show wheth	er DF, RKB, RT, GR, etc			
<i>\((((((((((((((((((((((((((((((((((((</i>	//////////////////////////////////////	5850 GL		<u> </u>	
11. Check A	ppropriate Box to Indicate	ľ			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CA	sing _
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND AB	ANDONMENT L
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB		
OTHER:		OTHER: Abandon M	1		X
12. Describe Proposed or Completed Opwork) SEE RULE 1103.  8/2/99 MIRU. TOH with	tubing. Set CIBP at 3760'.  2 3/8", 4.7# J-55 tubing s	ails, and give pertinent dat	es, including estin		
I hereby certify that the information above it	true and complete to the best of my knowledge	ge and belief.		<u></u>	
SIGNATURE Monica	aular II	rLE Production Assi	stant	DATE	8/16/99
TYPE OR PRINT NAME MONICA Taylo				TELEBRIONE NO	ENE 22E 6000
THE OK PRINT PARTE PROFITCE TRYTE	<u>or</u>			TELEPHONE NO.	505-325-6800

(This space for State Use)