Form 31	60-5
(August	1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
OMB NO. 1004-0135 / Expires: November 30, 200

SF-079011

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Expires: November	30,20
Leace Serial No.	$\overline{}$

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

6. If Indian, Allottee or Tribe Name

21996/		
If Unit or CA/Agr	eement. Name ar	id/or

LU UPTIC

			2199	
SUBMIT IN TRIPLICATE - 0	Other instructions	on reverse side AUG	2001 Ta. If Unit or	ČA/Agreement, Name and/or No. 32-5 Unit
Type of Well Oil Well X Gas Well Other		DIST	N. DIV Nell Nam	ne and No. 32-5 Unit 11B
. Name of Operator		Ser.	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
ENERGEN RESOURCES CORPORATION		3b. Phone No. (include orga	9. API Well	
Ba. Address 2198 Bloomfield Highway, Farmington	. NM 87401	505-325-6800	30-003-20	1 Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey L.	Description)		Blanco Me	
540' FSL, 2170' FEL, Sec. 23, T32N,	R06W, N.M.P.M.		11 6	David Ctata
			Rio Arril	or Parish, State
12. CHECK APPROPRIATE	POY(ES) TO INI	NOATE NATURE OF N		
·	BOX(E3) TO INI		OF ACTION	THE CONTRACTOR
TYPE OF SUBMISSION			OF ACTION	
Notice of Intent	Acidize	Deepen	Production (Start/Resume)	Water Shut-Off
	Alter Casing	Fracture Treat	Reclamation	Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplete	X Other spud
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporarily Abandon	
That Abandonnien Notice	Convert to Inject	ion Plug Back	Water Disposal	
08/05/01 Spud @ 6:00 am 08/05/01 set @ 237'. RU Halliburton. Cen down @ 8:50 pm 08/05/01. Circula casing to 600 psi - OK.	ment with 175 s	c Class B, 2% CaCl2,	1/4#/sx flocele (20	7 cu.ft.). Plug
			-	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	:	Title		
Name <i>(Printed/Typed)</i> Vicki Donaghe <u>y</u>		Produc	tion Assistant	· · · · · · · · · · · · · · · · · · ·
Vick: Marcaken		Date 08/08/01		
TA	S SPACE FOR FF	DERAL OR STATE OFF		
Approved by		Title		Date PECC
Conditions of approval, if any, are attached. Approval	of this notice does not	warrant or Office		IN MEDICAL
certify that the applicant holds legal or equitable title t which would entitle the applicant to conduct operations	o those rights in the su	warrant or Office bject lease	1000	2021

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.