

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-041-20471
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 024194
7. Lease Name or Unit Agreement Name: Lambirth A
8. Well Number 1
9. OGRID Number 162928
10. Pool name or Wildcat Peterson; Fusselman, South

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4410' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 ☐

2. Name of Operator
Energen Resources Corporation

3. Address of Operator
3300 N. A St., Bldg. 4, Ste. 100 Midland, TX 79705

4. Well Location
Unit Letter J : 2055 feet from the South line and 1980 feet from the East line
Section 31 Township 5S Range 33E NMPM County Roosevelt

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4410' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Temporarily abandon <input checked="" type="checkbox"/>

This Approval of Temporary Abandonment Expires 11/3/11

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/21-12/29/05 - MIRU Basic Service unit. ND WH. NU BOP. RIH w/bit & csg scraper. 20 jts 2-3/8" tbgs to 7824'. POOH w/tbg & scraper. RIH w/Weatherford 5-1/2" CIBP. Plug stopped at 4619'. POOH w/tbg, setting tool. CIBP broke off. RU wireline and RIH w/gauge ring. Tagged CIBP. POOH w/gauge ring, RIH w/sandline drill bailer w/chisel. Knocked CIBP to BTM. POOH w/bailer. RUWL & run gauge ring to 7880' RIH w/5-1/2" CIBP & set plug at 7790'. POOH & RDWL RIH w/open-ended 2-3/8" tbgs to CIBP at 7790'. Circulated hole w/180 bbls 2% KCLW treated pkr fluid. Pressure tested 500# for 30 mins w/chart. 1/4/06 - Permission granted by Gary Wink of NMOCD to run MIT test w/o OCD rep on loc. Loaded hole w/13 bbls of pkr fluid. Pressure tested 500# for 30 mins w/chart. Well is temporarily abandoned.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☒ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Carolyn Larson TITLE Regulatory Analyst DATE 1-5-06
Type or print name Carolyn Larson E-mail address: clarson@energen.com Telephone No. 432/684-3693

For State Use Only
APPROVED BY Gary W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE 11/11/2006
Conditions of Approval, if any _____

