Submit 3 Copies To Appropriate District State of New Me		Form C-103
Office Energy, Minerals and Natural Resources District.1		WELL API NO.
District II OIL CONSERVATION	I DIVISION	30-025-26612
1301 W. Grand Ave., Artesia, NM 88210		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 8710 0 5 20 Santa Fe, NM 87505		STATE 🔯 FEE 🗌
District IV 1220 S. St. Francis Dr., Santa Fe, NOBBSOCD 87505		6. State Oil & Gas Lease No. 027818
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		7. Lease Name or Unit Agreement Name: State 'M'COM
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other		8. Well Number
2. Name of Operator		9. OGRID Number
Energen Resources Corporation		162928
3. Address of Operator		10. Pool name or Wildcat
3300 N. 'A', Bldg. 4, Ste. 100, Midland, TX 79705 4. Well Location		Saumders; Permo-Upper Penn
	nth line and	660 feet from the West line
	Range 33E	NMPM County Lea
Section 03 Township 15S 11. Elevation (Show whether		
GR: 4199'		
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
12. Check Appropriate Box to maleute Platate of Plates, respect, of a sum 2 sum		
NOTICE OF INTENTION TO: SUE		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		☐ ALTERING CASING ☐
TEMPORARILY ABANDON		NG OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE	:	
DOWNHOLE COMMINGEL		
OTHER:	OTHER: MIT	x
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.		
12-16-10		
Perform MIT for extension of TA status. OCD representative Maxey Brown on location.		
This Approval of Temporary Abandonment Expires 16-2012		
Spud Date: Rig Rele	ase Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
Jan Alban L		
SIGNATURE TITLE Regulatory Analyst DATE 01-04-11 tracie.cherry@energen.com		
Type or print name Tracie J Cherry E-mail address: PHONE 432/684-3692		
For State Use Only		
APPROVED BY TITLE STAFF NEW DATE 1-6-201,		
Conditions of Approval (if any)		
/ -		•

