

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

APR 03 2013

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.

5. Lease Serial No.
Contact No. 183
6. If Indian, Allottee or Tribe Name
Jicarilla Apache

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.
Chacon Jicarilla D 20

2. Name of Operator

Energen Resources Corporation

9. API Well No.
30-043-20447

3a. Address

2010 Afton Place, Farmington, NM 87401

3b. Phone No. (include area code)

(505) 325-6800

10. Field and Pool, or Exploratory Area
West Lindrith Gallup Dakota

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

1770' FSL 1740' FWL, Sec. 27, T. 23N, R. 3W

11. County or Parish, State
Sandoval NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize <input type="checkbox"/> Deepen <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing <input type="checkbox"/> Fracture Treat <input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair <input type="checkbox"/> New Construction <input checked="" 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 recomplete 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 recompletion 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.)

Energen Resources would like to recomplete the existing West Lindrith Gallup Dakota pool. The existing perfs are from 7168'-7206' at 1spf 7234'-7239', 7272'-7278', 7286'-7290' at 2spf, and the estimated new perforations are 6164'-6340' at 3 spf. A CBL will be run from around 7100' to surface to determine TOC. Then, perforate and fracture. Clean out to PBD, then return full production from all perforations.

If perforations are above or below existing perfs please file: c-104 and Completion Report to include new perfs before returning to production.

RCVD APR 23 '13
OIL CONS. DIV.
DIST. 3

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

* Submit CBL For Agencies review prior to perfs

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Adam Klem

Title District Engineer

Signature

Date 4/3/13

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

[Signature]

Title

Petr. Eng.

Date

4/18/13

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

NIMCOO Ar

BLM CONDITIONS OF APPROVAL

CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:

1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. Provide this office with a copy of the CBL prior to commencing any necessary repair operations.
2. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.

SPECIAL STIPULATIONS:

1. Pits will be fenced during work-over operation.
2. All disturbance will be kept on existing pad.
3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.
4. Pits will be lined with an impervious material at least 12 mils thick.