## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

## SUNDRY NOTICES AND REPORTS ON WELLS

5. Lease Serial No.

Do not use this form for proposals abandoned well. Use Form 3160-3 (A	to drill or to re-enter an  APD) for such proposals:
SUBMIT IN TRIPLICATE - Other is	and the same and the same and
1. Type of Well  Oil Well X Gas Well Other  2. Name of Operator ENERGEN RESOURCES CORPORATION  3a. Address 2010 Afton Place, Farmington, NM 87401  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	8. Well Name and No. Jicarilla 117E 3  9. API Well No. 30-039-06200  10. Field and Pool, or Exploratory Area Tapacito Pictured Cliffs
1090' FSL, 1650' FWL, Sec. 34 T26N R3W N	• • • • • • • • • • • • • • • • • • • •
12. CHECK APPROPRIATE BOX(ES)	TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION
X Subsequent Report Casing  Final Abandonment Notice Conver	Casing Fracture Treat Reclamation X Well Integrity Repair New Construction Recomplete Other  e Plans Plug and Abandon Temporarily Abandon  et to Injection Plug Back Water Disposal
If the proposal is to deepen directionally or recomplete horizonta Attach the Bond under which the work will be performed or profollowing completion of the involved operations. If the operation testing has been completed. Final Abandonment Notices shall to determined that the final site is ready for final inspection.)  Upon inspection of the wellhead, Energen Final winew B1 and installed a new ring gasket.	inent details, including estimated starting date of any proposed work and approximate duration thereofold, give subsurface locations and measured and true vertical depths of all pertinent markers and zones wide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 day in results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once filed only after all requirements, including reclamation, have been completed, and the operator has desources replaced casing valves, Bradenhead valves, mater valve Upon completing repairs the Bradenhead tested good.

OIL CONS. DIV DIST. 3

JUL 1 5 2014

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Annal Stotts	Title Regulatory Analyst	
Signature AMM Stoll	Date 07/03/14	ACCEPTED FOR RECORD
THIS SPACE FOR FEDER	RAL OR STATE OFFICE USE	
Approved by	Title	JAL 1 1 2014
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	hat Office	FARMINGTON FIALD OFFICE BY: