

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-045-35642
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Crow Mesa 24-08 2
8. Well Number 3H
9. OGRID Number 162928
10. Pool name or Wildcat Dufers Point-Gallup Dakota

**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 2010 Afton Place, Farmington NM 87401

4. Well Location  
 Unit Letter I : 1419' feet from the South line and 505' feet from the East line  
 Section 2 Township 24N Range 8W NMPM County San Juan

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
7318' GL

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: Measurement Installment <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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

Energen Resources is hereby requesting authorization to install a gas lift artificial lift and measurement system on the subject well. Meters will be calibrated upon installation and quarterly there-after. The gas measurement skid will utilize both a sales and buy back metering system. Four check valves will be installed, one upstream and the other downstream of each orifice meter to prevent gas by-pass. Attached for your review is a detailed process flow diagram and measurement and reporting methodology. Utilizing this method of artificial lift and measurement will allow Energen to optimize well performance and maximize oil and gas recovery while maintaining system measurement accuracy and production accountability.

Completion operations are scheduled to begin 11/2/2015.

OIL CONS. DIV DIST. 3

OCT 22 2015

Spud Date: 08/13/15

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Theresa McAndrews TITLE Production Supervisor DATE 10/21/15

Type or print name Theresa McAndrews E-mail address: tmcandre@energen.com PHONE: 505-324-4168

**For State Use Only**

APPROVED BY: [Signature] TITLE DEPUTY OIL & GAS INSPECTOR DATE 11/18/15  
DISTRICT #3

Conditions of Approval (if any):

RV

