

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. 30-025-37361
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 34934
7. Lease Name or Unit Agreement Name: Brazos Deep State
8. Well Number 1
9. OGRID Number 162928
10. Pool name or Wildcat Wildcat; Devonian
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2500'
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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-104) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator Energen Resources Corporation	
3. Address of Operator 3300 North A St., Bldg. 100, Suite 100 Midland, TX 79705	
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>South</u> line and <u>710</u> feet from the <u>East</u> line Section <u>34</u> Township <u>14S</u> Range <u>33E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2500'	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Completion <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

11/21-12/19/05

Began swab-testing. EOT @13,571, pkr set @ 13,250'. Made 5 runs, no oil-cut. Start plug-back operations. RIH & set 5-1/2" 10M# Plugwell "Quickdrill" CIBP @ 13,540', POOH. Dumped 3 sacks/30ft of cmt on CIBP. RBIH & set 2nd Quick-Drill CIBP @ 13,180', tagged. Circulated 500 gals 15% HCL followed by 300 bbls of 2% FKCLW & spotted 500 gals of 15% HCL acid w/additives. Perforated Atoka w/3 3/8" "EXP" guns loaded w/3-25 gram Titan "SDP" 120 degree phased JSPF @ 12,096-12,104' (24 holes) and 12,306-12,318' (36 holes). Pumped 3M gals of 15% HCL acid w/additives. Opened well to test tank on 10/64" choke. Re-perforated Atoka perfs. RIH w/pkr & 379 jts 2-7/8" tubing down to 12,017'; set pkr @ 11,986'.

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 12/20/05
E-mail address: clarson@energen.com
Type or print name Carolyn Larson Telephone No. 432/684-3693

For State Use Only

APPROVED BY Harry W. Wink TITLE _____ DATE _____
Conditions of Approval, if any: _____

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6. State Oil & Gas Lease No. 34934	
7. Lease Name or Unit Agreement Name: Brazos Deep State	
8. Well Number 1	
9. OGRID Number 162928	
10. Pool name or Wildcat Wildcat: Devonian	
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.)	
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2. Name of Operator Energen Resources Corporation	
3. Address of Operator 3300 North A St., Bldg. 100, Suite 100 Midland, TX 79705	
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NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	OTHER: Completion <input checked="" type="checkbox"/>

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11/21-12/19/05 (cont)

Began flow testing to test tank. Ran production log which showed both sets of perfs to have influx of water & very little gas. Ran Tracer survey, showed CIBP failure. POOH to set another CIBP. POOH w/ tubing and packer. RIH & set a 5-1/2" 10m# Owens CIBP @13,050', dumped 2 sacks/15ft. of cmt on CIBP (PBD) is now 13,050'). RIH w/production packer. Opened well to the test tank on 48/64" choke. Flow testing, recovered a total of 48 BF (480 & 44 BW). Will continue to flow test.

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SIGNATURE Carolyn Larson TITLE Regulatory Analyst DATE 12/20/05

Type or print name Carolyn Larson

E-mail address: clarson@energen.com

Telephone No. 432/684-3693
OC FIELD REPRESENTATIVE II/STAFF MANAGER

For State Use Only

APPROVED BY _____ TITLE _____ DATE _____

Conditions of Approval, if any:

DEC 30 2005