

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. 30-025-33036
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 14045
7. Lease Name or Unit Agreement Name: Baer
8. Well Number 2
9. OGRID Number 162928
10. Pool name or Wildcat Big Dog; Strawn, South

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD
2. Name of Operator Energen Resources Corporation
3. Address of Operator 3300 N. A Street, Bldg. 4, Ste. 10 Midland, TX 79705
4. Well Location Unit Letter 0 : 810 feet from the South line and 2200 feet from the East line Section 32 Township 15S Range 35E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3994' GR
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 _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

8/31/05 - 9/7/05

MIRU Basic service unit. POOH and lay down rods. NU BOP, released TAC. SLM out of hole w/369 jts 2-7/8" tubing. RIH w/5-1/2" CIBP and set @ 11,510'. RIH w/5-1/2" pkr. SN, tbg to 4982'. Dug out bradenhead & plumbed to surface. Pressure tested CIBP to 2000#. Isolated csg leak between 7176-7679'. Tested 800# above 7176' & 800# below 7679'. Unable to get any test. Closed well in. Finished POOH & layed down 2-7/8" tubing & pkr. ND BOP, NU wellhead. RDSU. Well is shut-in.

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 2-14-06

Type or print name Carolyn Larson

E-mail address:

clarson@energen.com

Telephone No. 432/684-3693

For State Use Only

APPROVED BY Larry W. Wink

TITLE FIELD REPRESENTATIVE II/STAFF MANAGER

DATE FEB 20 2006

Conditions of Approval, if any