Submit 3 Copies To Appropriate District Office	State of New Me Energy, Minerals and Natu			Form C-103
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Millerais and Natu	Tal Resources	WELL API NO.	May 27, 2004
District II	d Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		30-025-3	
District III			5. Indicate Type of I	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	7505	STATE STATE	
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas L 34819	ease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAG DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH (PROPOSALS.)			7. Lease Name or U Big Dog Baer	nit Agreement Name:
1. Type of Well: Oil Well X Gas Well Other			8. Well Number	
2. Name of Operator			9. OGRID Number	
Energen Resources Corporation			162928	
3. Address of Operator 3300 North A St., Bldg. 4, Ste 100 Midland, TX 79705			10. Pool name or Wildcat South Big Dog - Strawn	
4. Well Location				
Unit Letter <u> </u>	1650 feet from the Nor	th line and	1672 feet from	theLastline
Section 32	Township 15S	Range 35E	NMPM	County Lea
	11. Elevation (Show whether	The second se		
Pit or Below-grade Tank Application	<u> </u>			
Pit type Depth to Groundwater .				
Pit Liner Thickness: <u>12</u> mil	Below-Grade Tank: Volume	<u>10M</u> bbls; Construction	on Material	
12. Check A NOTICE OF INTE PERFORM REMEDIAL WORK	ppropriate Box to Indicate ENTION TO: PLUG AND ABANDON 🗌		Report, or Other I SEQUENT REPO	
	CHANGE PLANS	COMMENCE DRILLI	ING OPNS.	PLUG AND
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB		
OTHER:		OTHER: Acidize		
13. Describe proposed or completed	operations (Clearly state all pe	• · · · · · · · · · · · · · · · · · · ·	e pertipent dates inclu	ding estimated date
of starting any proposed work). or recompletion.				
2/6/06 - 2/14/06 - Well ha Acidized the Strawn perfs		0 gals of 20% HCL	w/additives and a	6 B
18,000 gals of DGA320 50W foam in 5 stages. Shut in the well, removed the tree saver, RD all equipment and prep to flow back. Flowed back through the night and then began swabbing. Had light gas blow with				
no fluid recovery. Resume				
to 48/64 choke, blew down				
flowed to test tank for 24	hours, recovered 153 BO	and 23 BW. Contin	ue flowing to test	tank until CO2 is
below 5%. Turned well to			-	
I hereby certify that the information all grade tank has been/yill be constructed or cl	Nove is true and complete to the losed according to NMOCD guideline	best of my knowledge s X , a general permit	e and belief. I further ce or an (attached) altern	rtify that any pit or below- ative OCD-approved plan
SIGNATURE COLL	Jarson TIT	LERegulator	ry AnalystD	ATE3/30/06
Type or print name Carolyn Larson	E-r	nail address:	clarson@energen.c Telepho	
For State Use Only	E-r		Telepho	OM
		nail address:	Telepho	OM

,