

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
 June 19, 2008

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

WELL API NO. 30-041-20457
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 023845
7. Lease Name or Unit Agreement Name: Lambirth
8. Well Number 4
9. OGRID Number 162928
10. Pool name or Wildcat , Peterson; Penn. South (Assoc)

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: **HOBBS OCD**
 Oil Well Gas Well Other

2. Name of Operator **SEP 16 2017**
 Energen Resources Corporation

3. Address of Operator **RECEIVED**
 3510 N. A Street, Bldgs. A & B Midland, TX 79705

4. Well Location
 Unit Letter 0 : 660 feet from the South line and 1980 feet from the East line
 Section 31 Township 5S Range 33E NMPM County Roosevelt

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 4393' GR

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 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"/>			
OTHER: Return to Production <input type="checkbox"/>		OTHER: Returned well to production <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.

7/28 - 8/17/17 - Rigged up on well. Cleaned out well, Ran 2 3/8 tubing in hole to 7736'. Spaced out rods and hung well on. Started pumping unit.

Well returned to production 8/18/17. ✓

THANK YOU.

Spud Date:

Rig Release Date:

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

SIGNATURE Brenda Rathjen TITLE Regulatory Analyst DATE 09/15/2017
 Brenda.rathjen@energen.com
 Type or print name Brenda F Rathjen E-mail address: _____ PHONE 432-688-3323

For State Use Only
 APPROVED BY Mary Brown TITLE AO/II DATE 9/16/2017
 Conditions of Approval (if any): _____