

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
Received
Hobbs
OCD

WELL API NO.	30-025-02714
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:	State D
8. Well Number	5
9. OGRID Number	162928
10. Pool name or Wildcat	Townsend; Permo Upper Penn
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 3971'	
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 <input type="checkbox"/>	2. Name of Operator Energen Resources Corporation
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	4. Well Location Unit Letter <u>S</u> : <u>1980</u> feet from the <u>South</u> line and <u>2301</u> feet from the <u>West</u> line Section <u>1</u> Township <u>16-S</u> Range <u>35-E</u> NMPM County <u>Lea</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 3971'	
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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Plugback ☒

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.

6/6-6/19/07-POOH w/rods & tubing. RIH w/bit, scraper, SN & tbq. POH w/scraper and tbq. RIHW/CIBP and GR/CCL tool. Correlated to Halliburton log dated 9/4/56. Set CIBP @ 10,400'. Put on 3-1/8" csg guns w/23 gram charges @ 3 SPF and 120 degree phasing. Perforate Wolfcamp from 10,125-35' & 10,275-85' w/a total of 60 shots. RIH w/ RBP & 303 jts of tbq. Acidize w/1500 gals of 15% NEFE acid w/additives. Replaced pkr., spotted 1000 gals of 15% acid w/additives and re-acidized Lower Wolfcamp perms. Unset pkr., retrieved RBP and set the pkr. Acidized the Upper Wolfcamp perms w/1000 gals of 15% acid w/additives. Began swabbing. No trace of oil. Last runs of the day wer about 40% oil. Resumed swabbing lower Wolfcamp perms. Decision was made to prep the well for plugging. POOH w/rods and tubing. Well 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 6/19/07

Type or print name Carolyn Larson E-mail address: clarson@energen.com

OC DISTRICT SUPERVISOR/GENERAL MANAGER No. 432/684-3693

For State Use Only

APPROVED BY Chris Williams TITLE _____ DATE JUN 22 2007

Conditions of Approval, if any: