

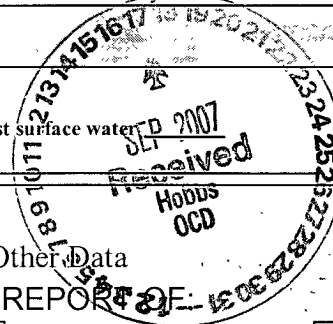
Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
May 27, 2004

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-025-31830
2. Name of Operator Energen Resources Corporation	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>B</u> : <u>590</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>1</u> Township <u>16S</u> Range <u>35E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3978.3' GR	8. Well Number 5
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	9. OGRID Number 162928
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	10. Pool name or Wildcat Lovington, Strawn, West
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
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.

8/28-9/1/07 - MIRU Key rig #161. Layed down 354 jts 2-7/8" N-80 tbg. and 96 fiberglass rods. Rig up Gray Wireline and run gamma tool to 11,450'. Pulled correlation strip. RIH & set 5-1/2" Plugwell Quick Drill CIBP at 11,350'. Dump bail 2sx cmt on top of plug. Ran CIT log from 9500-4800'. RDWL Well is shut-in until further notice for casing evaluation.

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 9/14/07

Type or print name Carolyn Larson

E-mail address:

Telephone No. 432 684-3693

For State Use Only

APPROVED BY Gay W. Wink TITLE OC FIELD REPRESENTATIVE / STAFF MANAGER DATE SEP 17 2007

Conditions of Approval, if any: