

1/16/2008 P/A'D. OK TO RELEASE.
MJB.

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

WELL API NO. 30-025-34073
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 21108
7. Lease Name or Unit Agreement Name: Snyder A Com
8. Well Number 1
9. OGRID Number 162928
10. Pool name or Wildcat Shoe Bar; Strawn, Northeast

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3956' GR, 3976' KB

Pit or Below-grade Tank Application ☐ or Closure ☐
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 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 checked="" 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.

12/13/05 (cont) to 1708', squeezed 35 sx plug. Disp to 1850'. POOH w/packer, RIH w/wireline, perf @ 448', POOH w/wireline. RIH w/packer, set @262', squeezed a 40sx plug w/2% CACL. displaced to 348', WOC, tagged TOC @327'. POOH, RIH & perf @ 70'. POOH, ND BOP, NU wellhead, pumped 20 sx plug down 5-1/2" casing, circulated cement out 8-5/8" annulus. SI the well, will cut off wellhead, anchors and install DHM at a later date. Well is plugged and abandoned.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

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 NMOC guidelines ☒ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Carolyn Larson TITLE Regulatory Analyst DATE _____

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 OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____

Conditions of Approval, if any:

OC FIELD REPRESENTATIVE II/STAFF MANAGER

DEC 28 2005