

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

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.

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	7. Lease Name or Unit Agreement Name: State D
2. Name of Operator Energen Resources Corporation	8. Well Number 5
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	9. OGRID Number 162928
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>	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 _____

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.

12/13/07 - RIH w/wireline, tag existing CIBP @ 10,043. Circuate hole with MLF.
12/14/07 - tubing @ 7100'. Spot 40 sacks "C" cmt. Calculated TOC @ 6800'. Perforate @ 4689', set pkr @ 4217'. Pressure tested @ 600 psi. Ok'd by Maxie to spot plug.
12/17/07 - tubing @ 4739'. Spot 50 sacks "C" cmt 2% CACH. WOC & tag @ 4355'
12/18/07 - Tubing @ 2000'. Spot 40 sacks "C" cmt 2% CACH. WOC & tag @ 1872'. Tubing @ 453'. Spot 40 sacks "C" cement 2% CACH. WOC & tag @ 353'.
12/19/07 Tubing at 70'. Spot 20 sacks "C" cmt to surface. Well is plugged and abandoned.

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 6/28/07
Type or print name Carolyn Larson E-mail address: clarson@energen.com Telephone No. 432/684-3693

For State Use Only

APPROVED BY Chris Williams TITLE OC DISTRICT SUPERVISOR/LEGAL MANAGER DATE JAN 18 2008
Conditions of Approval, if any: