

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-33036
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Energen Resources Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 3300 N. A Street, Bldg. 4, Ste. 10 Midland, TX 79705		7. Lease Name or Unit Agreement Name: Baer
4. Well Location Unit Letter 0 : 810 feet from the South line and 2200 feet from the East line Section 32 Township 15S Range 35E NMPM County Lea		8. Well Number 2
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3994' GR		9. OGRID Number 162928
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	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: \_\_\_\_\_

1/10-1/16/08

RUWL and set CIBP @ 10,250'. Dump bailed 30' of Class H cmt on top of plug.

Spot 30sx Class C cmt w/2% CACL2. WOC. Tag TOC at 6547'. Perforated 4 holes in casing at 4723'.

Set pkr at 4423' and squeezed 50sx Class C cmt thru perf holes at 4723'. Tagged TOC @ 4590'. Spotted

30sx Class C cmt at 1710'. Tag TOC @ 1467'. Perforate 4 holes at 447'. Pumped 50 sx Class C cmt thru

squeeze holes. WOC. Tag TOC @ 320'. Perf 4 holes at 70'. Circulated 20sx of cement through perfs 70'

to surface. Well is plugged and abandoned. Basic will cut off wellhead & mast anchors at a later date.

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 01/16/08

E-mail address: clarson@energen.com

Type or print name Carolyn Larson

Telephone No. 432/684-3693

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APPROVED BY Chris Williams TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE FEB 06 2008

Conditions of Approval, if any: