

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 87401  
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

RECEIVED

FEB 29 2008

OIL CONSERVATION DIVISION

HOBBS OCD

1220 South St. Francis Dr.  
Santa Fe, NM 87505

RECEIVED

WELL API NO. 30-025-32526
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 27820
7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit
8. Well Number 10
9. OGRID Number 162928
10. Pool name or Wildcat Lovington, Strawn, West
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3979'
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 _____	
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>G</u> : <u>2310'</u> feet from the <u>North</u> line and <u>1980'</u> feet from the <u>East</u> line Section <u>33</u> Township <u>15S</u> Range <u>35E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3979'	
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: Add pay Shut-In ☒

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.

2/18-23/08

Rig up Basic Service Unit. Opened well which was on a strong vacuum. Let well equalize for 4 hours. RU Gray Wireline. TIH w/4.5" OD gauge ring, junk basket & tagged at 5593'. Gauge ring hung up. RIH w/4.343" OD gauge ring, junk basket. Could not get below 5609'. Finally worked free. RIH w/a bit, scraper & tubing. Also hanging up. Did not tag anything thru tight spot in casing at 5609-5616'. Tagged CIBP @ 11,502' by SLM. Layed down 195 jts 2-3/8" N-80 tubing. ND BOP. Well is shut-in until further notice.

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 2/27/08

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 OC DISTRICT SUPERVISOR/GENERAL MANAGER TITLE \_\_\_\_\_ DATE APR 04 2008

Conditions of Approval, if any: