

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
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  
**RECEIVED**  
OIL CONSERVATION DIVISION  
FEB 05 2009  
HOBBSOCD  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
June 19, 2008

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-11533 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> <i>Fed</i>
2. Name of Operator Energen Resources Corporation		6. State Oil & Gas Lease No. 24695
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705		7. Lease Name or Unit Agreement Name: Stuart Langlie Mattix Unit
4. Well Location Unit Letter <u>E</u> : <u>2310'</u> feet from the <u>North</u> line and <u>330'</u> feet from the <u>West</u> line Section <u>11</u> Township <u>25-S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number 119
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3130' GR		9. OGRID Number 162928 ✓
		10. Pool name or Wildcat Langlie Mattix 7 RVRS Queen ✓

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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: MIT <i>T/A</i> <input checked="" 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.

MIT performed 01-26-09 for extension of approved TA status. John R Harrison NMOCD witness on location.

This Approval of Temporary  
Abandonment Expires 2-6-2014

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Tracie J Cherry* TITLE Regulatory Analyst DATE 02-04-09  
Type or print name Tracie J Cherry E-mail address: \_\_\_\_\_ PHONE 432 684-3692

For State Use Only

APPROVED BY *Tony M. Hill* TITLE DISTRICT 1 SUPERVISOR DATE FEB 06 2009  
Conditions of Approval (if any): \_\_\_\_\_

