Submit 3 Copies To Appropriate District State of New Me	
Office Energy, Minerals and Natu District I 1625 N French Dr., Hobbs, NM 87240 POINTER VATION	WELL API NO.
1201 N. Carad Ann. Artenia NM 99210	N DIVISION 30-025-11412 5. Indicate Type of Lease
District III District III DEC 0 0 21220 South St. Fra	nncis Dr. STATE XX FEE STATE XX
1000 Rio Brazos Rd, Aztec, NM 87410 District IV 1220 S St Francis Dr, Santa Fe, NM HOBBSUCD	6. State Oil & Gas Lease No.
1220 S St Francis Dr , Santa Fe, NM 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	24695
SUNDRY NOTICES AND REPORTS ON WEL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10 PROPOSALS)	OR PLUG BACK TO A Stuart Langlie Mattix Unit
1. Type of Well: Oil Well Gas Well Other Water injection	8. Well Number
2. Name of Operator	9. OGRID Number
Energen Resources Corporation	162928
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	10. Pool name or Wildcat Langlie Mattix 7 RVRS Queen Grayburg
4. Well Location	
Unit Letter K : 1980 feet from the Sou	uth line and 1980' feet from the West line
	Range 37E NMPM Lea County New Mexico
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3152' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
12. Check Appropriate Box to indicate	Nature of Notice, Report, of Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING	CASING/CEMENT JOB
DOWNHOLE COMMINGLE	
OTHER:	OTHER: Temporary abandonment
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.	
12/03/2009	
Conduct MIT to continue TA status. OCD representative Mark Whitaker on site. Chart attached.	
This Approval of Temporary 0 26//	
This Approval of Temporary Abandonment Expires	
4	· **4
Rig Polo	acco Data:
Spud Date: Rig Relea	ase Date:
I hereby certify that the information above is true and complete to the	e best of my knowledge and belief.
SIGNATURE TIT	LE Regulatory Analyst DATE 12-07-09
Type or print name <u>Tracie J Cherry</u> E-n	tracie.cherry@energen.com nail address:PHONE_432/684-3692
For State Use Only DISTRICT & SUPERVISOR DEC 0 9 2009	
. //	TLEDATE
Conditions of Approval (if any)	

