

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB NO 1004-0137
Expires July 31, 2010

RECEIVED
SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5 Lease Serial No CC032511
24695 STATE FEE
6 If Indian, Allottee or Tribe Name

N/A

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other Injection Well ✓

2 Name of Operator

Energen Resources Corporation ✓

3a Address

3300 N. 'A', Bldg 4, Ste 100, Midland, TX 79705

3b Phone No (include area code)

432/684-3692

4 Location of Well (Footage, Sec., T., R., M., or Survey Description)

990' FNL & 2310' FEL
Sec 11, T25S, R37E

7. If Unit or CA/Agreement, Name and/or No
8910088970 NM 710745A

8 Well Name and No

Stuart Langlie Well #108 ✓
Mattix Unit

9 API Well No

30-025-11534 ✓

10 Field and Pool, or Exploratory Area

Langlie Mattix 7 RVRS ✓
Queen Grayburg

11 County or Parish, State

Lea NM ✓

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

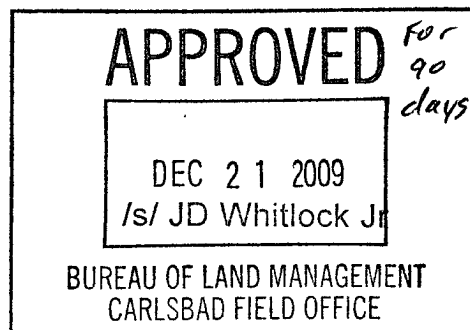
13 Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

12/03/09

Conduct MIT to continue TA status. NMOCD representative Mark Whitaker on site. Original recording chart sent to NMOCD; copy attached.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

Well Last used 5/1998



14 I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Tracie J Cherry

Title Regulatory Analyst

Signature

Date 12-09-09

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

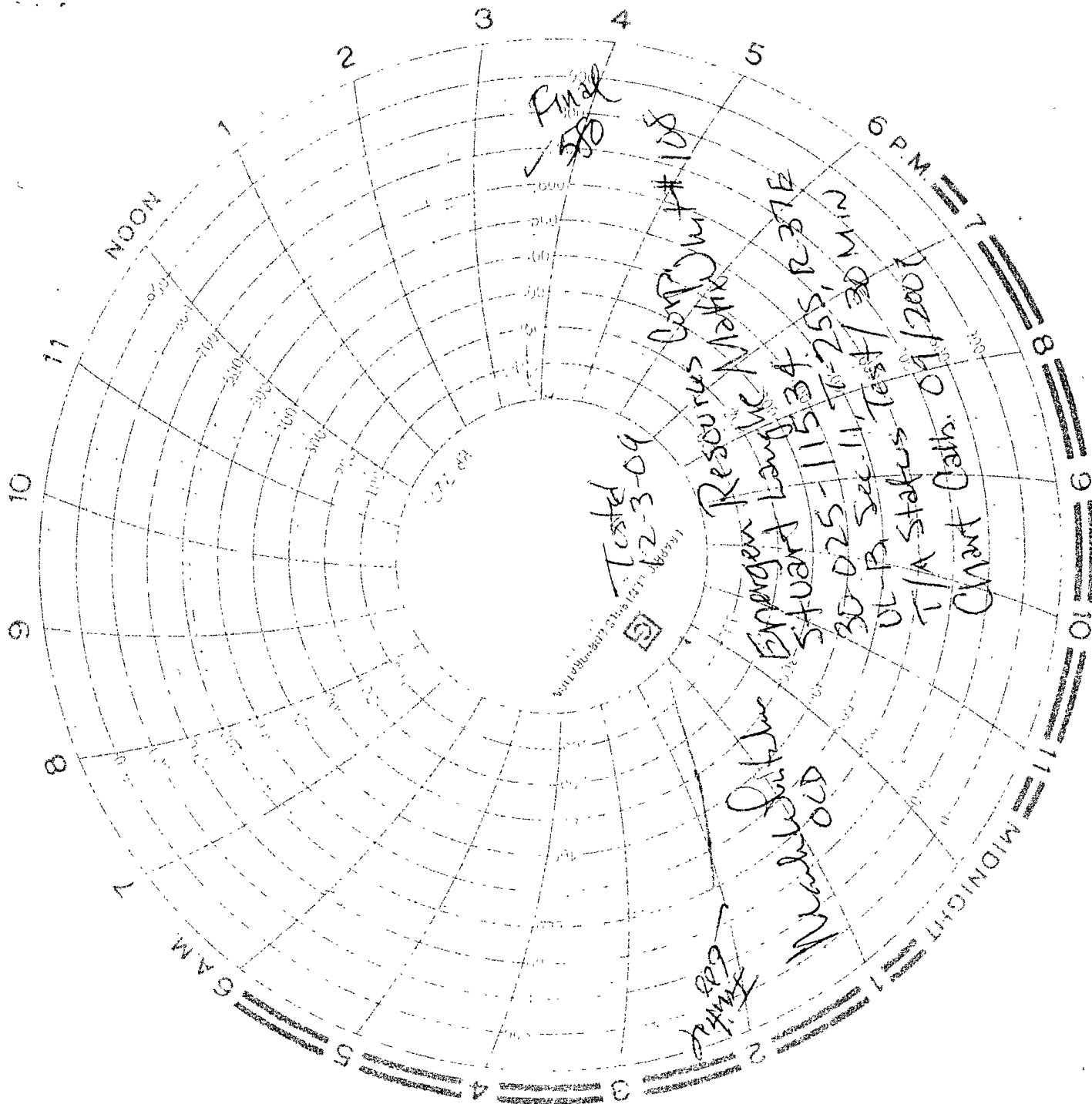
Approved by

Title

Date DEC 28 2009

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon

Office



Tested 12-3-09

Emergency Resources
Stuart Lang 34
30-025-11534
ULB Sec. 11, 16-255, R-37E
T/A Status Test / 30 MIN
Chart Cath. 09/2008

Wachschutze

Final 58

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