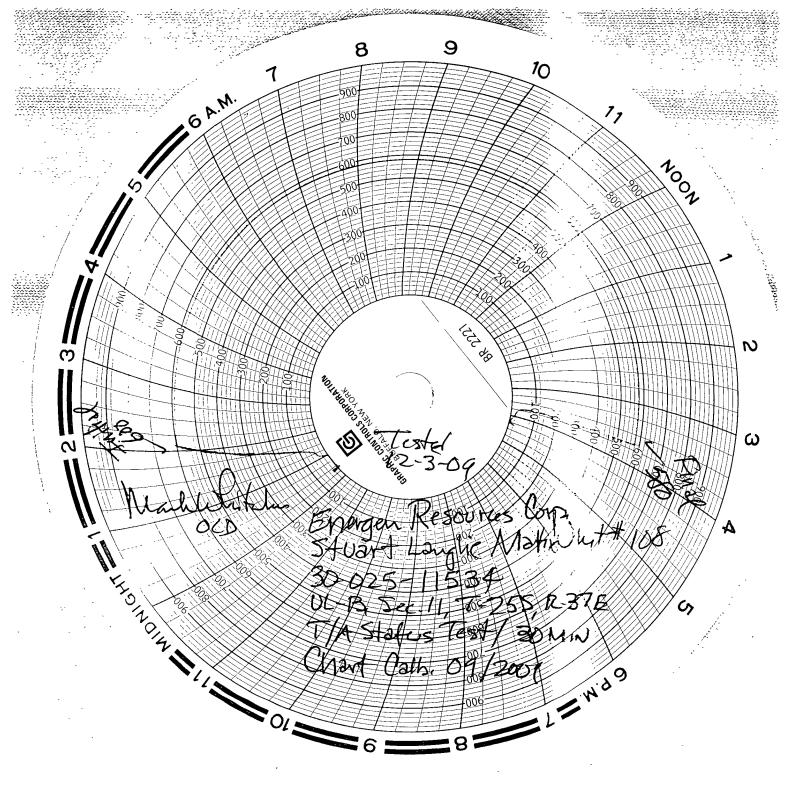
Submit 3 Copies To Appropriate District Office State of New Me	
Office Energy, Minerals and Natural Resources June 19, 2008 District I 1625 N. French Dr., Hobbs, NM 87240 WELL API NO.	
District II 1301 W Grand Ave , Artesia, NMSTECE OH CONSERVATION District III	N DIVISION 30-025-11534 5. Indicate Type of Lease Fodoral
District III 1000 Rio Brazos Rd., Aztec, NM 874 DEC 0 9 2009 Santa Fe, NM 8 Santa Fe, NM 8	ncis Dr. STATE XX FEE
87505 HOBBSOCD 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 108
2. Name of Operator	9. OGRID Number
Energen Resources Corporation 162928 3. Address of Operator 10. Pool name or Wildcat	
3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705 Langlie Mattix 7 RVRS Queen Grayburg	
4. Well Location	
Unit Letter B: 990 feet from the Nor	th line and 2310 feet from the East line
	Range 37E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3132' DF	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
12. Check Appropriate Box to maleute Nature of Notice, Report, of Suiter Bata	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING	CASING/CEMENT JOB
DOWNHOLE COMMINGLE	
OTUED.	OTHER: Temporary abandonment XX
OTHER: OTHER: Temporary abandonment [XX] 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 2-7-2011 Abandonment Expires	
Abandonment Expires	
•	
Spud Date: Rig Relea	se Date:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE STATE TITE	LE Regulatory Analyst DATE 12-07-09
	tracie.cherry@energen.com ail address:PHONE 432/684-3692
For State Use Only a 2010	
APPROVED BY TITLE DISTRICT 1. SUPERVISOR DATE	
Conditions of Approval (if any)	



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