Form 3160-5 (August 2007)

entitle the applicant to conduct operations thereon.

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

ORECEIVED

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

5. Lease Serial No

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter and 2 1 2010

24695 State
6 If Indian, Allottee or Tribe Name

abandoned well. Use Form 3160-3 (APD) for such proposals:				n/a		
SUBMIT IN TRIPLICATE - Other instructions on page 2			3066	7. If Unit or CA/Agreement, Name and/or No. 8910088970		
1. Type of Well Oil Well Gas Well X Other 2. Name of Operator Energen Resources Corporation 3a. Address 3300 N. "A" St., Bldg.4, Ste.100 Mi 4 Location of Well (Footage, Sec., T., R., M., or Survey D. U-N, Sec. 2, T-25S, R-37E, Lot N 660' FSL & 1980' FWL	dland,TX 79705	WIW Phone No. (<i>include are</i> 432/684-3693	a code)	8. Well Name and Stuart Langl Mattix Unit 9. API Well No 30-025-11411 10. Field and Poo 37240	ie , l, or Explor	#107 / atory Area
				Lea		NM
12. CHECK APPROPRIATE	BOX(ES) TO INDICA	TE NATURE OF N	OTICE, REPOR	T, OR OTHER I	DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent XX Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Production (Water Shu Well Integ	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporarily Water Dispo	Abandon		
If the proposal is to deepen directionally or recomple Attach the Bond under which the work will be perfectly following completion of the involved operations. If testing has been completed. Final Abandonment Not determined that the final site is ready for final inspection. See attached NMOCD form C-103 form.	ormed or provide the Bond the operation results in a motices shall be filed only af tion.)	No. on file with BLM/E ultiple completion or receiver all requirements, incl	SEP	osequent reports sh w interval, a Form	all be filed 3160-4 sha leted, and the	within 30 days
14 I hereby certify that the foregoing is true and correct						
Name (Printed/Typed) Tracie J Cherry	Title Regulatory Analyst					
Signature Sava Cherry						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by 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						
Approved by	9-22-10	Title	DECEMBER 1	Date	SEP 2	2 2010
Conditions of approval, if any, are attached Approval of this notice the applicant holds legal or equitable title to those rights in the subje	e does not warrant or certify tha	Office				

Office Charge M	State of New Mexico inerals and Naturàl Resources	Form C-103 October 25, 2007				
District 1 1625 N French Dr., Hobbs, NM 8724 ECENTE)	WELL API NO.				
		30 - 025 - 11411 5. Indicate Type of Lease				
District II 1301 W Grand Ave., Artesia, NM 88210 13 2010 22 District III 1000 Rea Presser Rd. Artes. NM 87410	O South St. Francis Dr.	STATE STATE FEE				
1000 Rio Brazos Rd , Aztec, NM 87410 District IV 1220 S. St. Francis Dr , Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.				
1220 S. St Francis Dr , Santa Fe, NM 87503	•	24695				
SUNDRY NOTICES AND REI (DO NOT USE THIS FORM FOR PROPOSALS TO DRIL DIFFERENT RESERVOIR. USE "APPLICATION FOR PE	7. Lease Name or Unit Agreement Name: Stuart Langlie Mattix Unit					
PROPOSALS)		8. Well Number				
1. Type of Well: Oil Well Gas Well	107					
2. Name of Operator	9. OGRID Number					
Energen Resources Corporation	162928					
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Mid	10. Pool name or Wildcat Langlie Mattix 7 RVRS Queen Grayburg					
4. Well Location Unit Letter N : 660 feet from the South line and 1980 feet from the West line						
Section 2 Township 25S Range 37E NMPM County Lea						
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR: 3139'						
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INTENTION TO): SUB	SEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND	ABANDON 🔲 REMEDIAL WORK	☐ ALTERING CASING ☐				
TEMPORARILY ABANDON CHANGE PL						
PULL OR ALTER CASING MULTIPLE	COMPL CASING/CEMENT JO	DB 📙				
OTHER:	☐ ☑ Location is rea	dy for OCD inspection after P&A				
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. RX Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.						
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the						
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR						
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.						
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and						
other production equipment. Anchors, dead men, tie downs and risers have	been cut off at least two feet below grou	and level.				
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with						
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed						
from lease and well location. XX All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have						
All metal bolts and other materials have been to be removed.)	removed. Portable bases have been rem	oved. (Poured onsite concrete bases do not have				
All other environmental concerns have been a	ddressed as per OCD rules.					
Pipelines and flow lines have been abandoned in accordance with 19.15.9.714.B(4)(b) NMAC. All fluids have been removed from						
non-retrieved flow lines and pipelines.						
When all work has been completed, return this form inspection has to be made to a P&A location becaus						
SIGNATURE MICE TITLE Regulatory DATE 08-12-10						
Tracie J Cherry TYPE OR PRINT NAME	E-MAIL	PHONE432/684-3692				
For State Use Only						
APPROVED BY Warle Shitch TITLE Compliance Officer DATE 8-17-2010 Conditions of Approval, if any:						
Conditions of Experience, it mily.	Dur					