Submit 3 Copies To Appropriate District	State of New Me			Form C-103
Office District I	Energy, Minerals and Natu	iral Resources		June 19, 2008
1625 N. French Dr., Hobbs, NM 87240			WELL API NO.	20050
District II 1301 W. Grand Ave., Artesia, NEECEIVE CONSERVATION DIVISION District III			5. Indicate Type o	
			I	/
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			STATE _	FEE x
District IV 1220 S. St. Francis Dr., Santa Fe, NMAN 0 5 2011 87505			6. State Oil & Gas 27820	Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7 Lease Name or	Unit Agreement Name:
(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.)			West Lovington	_
1. Type of Well: Oil Well X Gas Well Other			8. Well Number	11
2. Name of Operator Energen Resources Corporation			9. OGRID Number	162928
3. Address of Operator			10. Pool name or	
3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705			Lovington, Strawn, West	
4. Well Location	/	 	· LOVELACOLY DELE	imily NOSC
Unit Letter B:	760 feet from the No r	rth line and	2090 feet from	m the East line
Jane Letter	,	,		<i>_</i>
Section 33 /	1	Range 35E	NMPM	County Lea /
	11. Elevation (Show whether	DR, RKB, R1, GR, etc	c.)	
12 Cl . 1 A		NI 4 CNI 4' I	D 4 041 1	D 4
12. Check App	propriate Box to Indicate	Nature of Notice, I	Report, or Other	Data
NOTICE OF INTENTION TO: SUBS			SEQUENT REF	OODT OE
			SEQUENT REF	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				ALTERING CASING
TEMPORARILY ABANDON			NG OPNS.	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	ов 🗆	
DOWNHOLE COMMINGLE				
		:		_
OTHER:		OTHER: MIT		X
 Describe proposed or completed of starting any proposed work). So or recompletion. 			-	•
12-16-10				
Danifara Mari fara arkanai ar	5 m) 000			
Perform MIT for extension of TA status. OCD representative Maxwy Brown on location.				
	This Approva Abandonmer	nt Expires	-16-201	3
Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information abo	ove is true and complete to the	best of my knowledge	e and belief.	
6 () 66				
SIGNATURE /// SIGNATURE	TITI			DATE01-04-11
Type or print name <u>Tracie J Cherry</u>	E-m	tracie.cherry@e ail address:	-	PHONE 432 684-3692
For State Use Only	7 / /	_		
APPROVED BY	alan_ TIT	TLE STAFF 11	ngr I	DATE 1-6-2011
Conditions of Approval (if any):	,			

