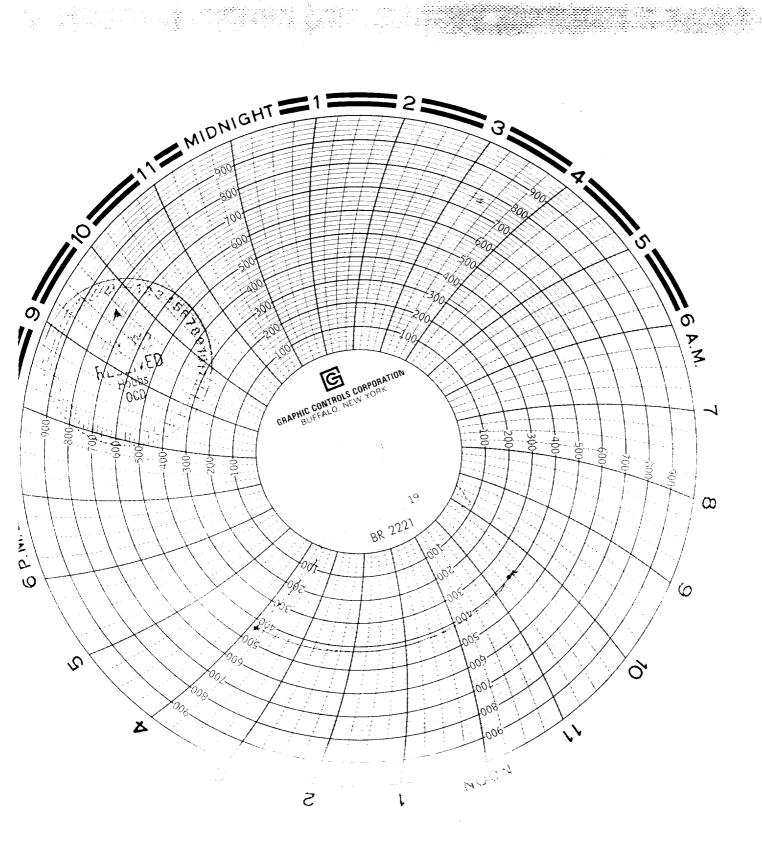
State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-041-20514 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 23844 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.) Lambirth State 1. Type of Well: Oil Well Gas Well Other 8. Well No. 2. Name of Operator Energen Resources Corporation 3. Address of Operator 9. Pool name or Wildcat 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705 Fusselman 4. Well Location 1980 North 510 East feet from the feet from the Unit Letter line and\_ line **NMPM** Section 36 Township Range County Roosevelt 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT** CASING TEST AND PULL OR ALTER CASING **MULTIPLE CEMENT JOB** COMPLETION OTHER: Pressure Test OTHER: 12. 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 recompilation. Pressure test dated 5/10/2002 on Lambirth State #1 SWD held at 420#. SCOOL I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Regulatory Analyst SIGNATURE Type or print name Sharon Hindman Telephone No. 915 684-3693 ORIGINAL SIGNED BY (This space for State use) GARY W. WINK OCHED REPRESENTATIVE ILISTAFF MANDAFF APPROVED BY\_ Conditions of approval, if any:

5



ENERGEN Resources

LAMbirth State # 15 WD

5/10/02 Ax Smitt

Stearns Inc.

90 min clock
Elapsed Time38 min