

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-32184
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Energen Resources Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 3300 N. "A" St., Bldg. 4, Ste. 100, Midland, TX 79705		7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit
4. Well Location Unit Letter <u>K</u> : <u>1880</u> feet from the <u>South</u> line and <u>2080</u> feet from the <u>West</u> line Section <u>33</u> Township <u>15S</u> Range <u>35E</u> NMPM County <u>Lea</u>		8. Well No. 3
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat Lovington, Strawn, West

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

Plan to move on to squeeze the existing perforations from 11,556'-600', perforate lower in the zone from 11,610'-14' in an attempt to lower the GOR, acidize if necessary, and return the well to poruction.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Verna Dawson TITLE Regulatory Analyst DATE 08/20/01

Type or print name Verna Dawson

Telephone No. 915-687-2074

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any: