

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

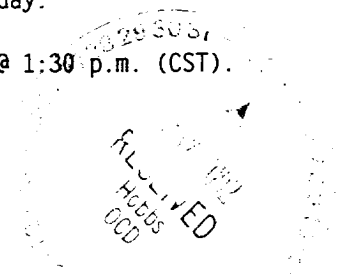
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-025-33219
2. Name of Operator Energen Resources Corporation	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	6. State Oil & Gas Lease No. 27820
4. Well Location Unit Letter <u>B</u> : <u>1346</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>6</u> Township <u>16S</u> Range <u>36E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3954' GR	8. Well No. 15
	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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

4/1/02 Move in rig up Great Basin Well Service Rig #225.
4/4/02 Perforate additional Strawn from 11.514-11.570'. Reperf existing interval from 11.540-11.548'.
4/5/02 Spot 5 bbls 15% HCL/ D1 W/ 35 bbls 2% FKCLW & waiting 30 min. Acidized w/ 3M gals of 15% HCL/ D1 acid w/ additives & 400 - 7/8" 1.3 SGBS. Swab well & recovered 157 BF for the day.
4/8/02 RIH w/ 2 7/8" tbg. EOT @ 11.620'.
4/9/02 RIH w/ RHBC pump & rods, started pump testing the well to tank battery @ 1:30 p.m. (CST).



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

SIGNATURE Sharon Hindman TITLE Regulatory Analyst DATE 05/01/2002

Type or print name Sharon Hindman Telephone No. 915 684-3693

(This space for State use)

APPROVED BY _____ TITLE PAUL F. KAUTZ DATE MAY 06 2002
Conditions of approval, if any: PETROLEUM ENGINEER