Submit 3 Copies To Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 Revised March 25, 1999

District I						, .,,	
District I 1625 N. French Dr., Hobbs, NM 87240	_	WELL API NO. 30-025-35704					
District II 811 South First, Artesia, NM 87210	OIL CONSERVATIO	5. Indicate Type of Lease					
- <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pac Santa Fe, NM 8	STATE FEE X					
District IV 2040 South Pacheco, Santa Fe, NM 87505	Santa i e, i vivi e	6. State Oil & Gas Lease No.					
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:				7. Lease Name or Unit Agreement Name: West Lovington Strawn Unit			
Oil Well X Gas Well Other 2. Name of Operator				8. Well No.			
Energen Resources Corporation				21			
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705				9. Pool name or Wildcat Lovington, Strawn, West			
4. Well Location							
Unit Letter H:	1800 feet from the No	rth line and	660 f	eet from the	East	line	
Section 32	Township 15S	Range 35E	NMPM	County	y Le	ea	
	10. Elevation (Show whether	· <i>DR, RKB, RT, GR, et</i> 92' GL	c.)			dia.	
11 Check A	Appropriate Box to Indicate		Report, or	Other Data		A MAN ARRANGE	
NOTICE OF INTE	1 1			T REPORT ()E·		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	OLQULIT		RING CAS	ING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS.		AND	F 200	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		X ABANI	NAMNOO .≁. 	3,	
OTHER:		OTHER: Completion	on Pa	age 2 of 2	1811 Silve	Q	
	SEE RULE 1103. For Multiple /CCL from WL PBTD of 11,81	Completions: Attach	ive pertinent of wellbore diag	dates, including 6 gram of proposed 8,836 & showe	d complet	ìon	
	perforated. MIRU Great B		IU BOP & SDF	·WE.			
	% HCL/DL acid w/additives n from 11,596'-11,608'. R		5 1/2" Lok	set pkr & 362	2 its 2 7	7/8"	
	460' and tested. Recovere			000 p.m. a 000	. 500	, 0	
	ered total Of 205 BO & 38	BW. Continue flow	testing.	SI well to co	onnect to	gas (
salesline.	na tank htny						
12/12/01-12/25/01 Buildir 12/26/01 Opened well to I	battery on 14/64" choke.	Average gas sales	325-340 MCF	-/Dav.			
•	flowed 232 BO + 0 BW - 377			-	LO # .		
I hereby certify that the information above	is true and complete to the best of	my knowledge and belie	f.				
\mathcal{L}	\prec / \cdot						
SIGNATURE Than	- Vindma TITI	<u>F Regulatory Anal</u>	yst	DATE	01/04/0	2	
Type or print name Sharon Hindman			7	Γelephone No.	915 684	3693	

(This space for State use) DATE JAN 2 4 2002 APPROVED BY_______Conditions of approval, if any: