

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

<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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WIW	WELL API NO. 30-025-09391
2. Name of Operator Energen Resources Corporation	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	6. State Oil & Gas Lease No. 23267
4. Well Location Unit Letter <u>N</u> : <u>600</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>23</u> Township <u>23S</u> Range <u>36E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: Langlie Lynn Queen Unit
8. Well No. 7	
9. Pool name or Wildcat Langlie Mattix 7 RVRS/Queen/GB	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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: Well converted to WIW - Run MIT test ☒

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.

Work performed to convert well to injection 4/4-7/00. Permit approved for injection 12/19/01 WFX-521. WFX-581. Performed casing integrity test on 2/5/02, chart attached. Plan to start water injection prior to 03/01/02.

WFX-780  
WFX-521

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 02/11/2002

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

(This space for State use)

APPROVED BY \_\_\_\_\_ ORIGINAL SIGNED BY \_\_\_\_\_ DATE 02/11/2002  
Conditions of approval, if any: \_\_\_\_\_ OC FIELD REPRESENTATIVE II/STAFF MANAGER