

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-09391
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	23267
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 Grayburg	

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection Well	
2. Name of Operator Energen Resources Corporation	
3. Address of Operator 3300 N. "A" St, Bldg 4, Ste 100, Midland, TX 79705	
4. Well Location Unit Letter <u>N</u> : <u>660</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>23-S</u> Range <u>36-E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,385' KB	

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 ☐  
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.

Perforate Upper Queen as follows: 3510-20', 3532-40', 1-JSPF, 20 holes total.

Acidize with 3000 gals 15% NEFe acid and RCN balls.

Estimated date of procedure: 1/5/99

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

SIGNATURE Denise Menoud TITLE Production Tech. DATE 1/4/99

TYPE OR PRINT NAME Denise Menoud TELEPHONE NO. 915-687-207

(This space for State Use)

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

CONDITIONS OF APPROVAL, IF ANY:

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1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.	30-025-09391
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	23267
7. Lease Name or Unit Agreement Name Langlie Lynn Queen Unit	
8. Well No.	7
9. Pool name or Wildcat	Langlie Mattix 7 Rivers Queen Grayburg
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3385' KB

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"/> Shut In GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator Energen Resources Corporation
3. Address of Operator 3300 North "A", Bldg. 4, Suite 100, Midland, Texas 79705	4. Well Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line Section 23 Township 23-S Range 36-E NMPM Lea County

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"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <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.

1-12-99 RU & Perf 3570-600' (31 holes), 3560-64' (5 holes), 3550-58' (9 holes),  
3530-38' (9 holes) & 3510-20' (21 holes).  
1-13-99 Acidized w/4500 gals 15% HCL  
1-14-99 Swab and test  
1-15-99 Ran production tubing & rods &egan pump testing.  
2-26-99 Avg. Prod. 2 BO - 42 BW - 0 MCF (Uneconomical). Shut well in.

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

SIGNATURE Sharon Crabb TITLE Production Clerk DATE 8-12-99

TYPE OR PRINT NAME Sharon Crabb TELEPHONE NO. 915-687-1155

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY CHRIS WILLIAMS TITLE DISTRICT I SUPERVISOR DATE AUG 18 1999  
CONDITIONS OF APPROVAL, IF ANY: