Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, __nerals and Natural Resources Department

Form C-103 Revised 1-1-89

DATE

OIL CONSERVATION DIVISION DISTRICT WELL API NO. P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St. 30-025-20049 **DISTRICT II** Santa Fe, NM 87505 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE X 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 23267 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Langlie Lynn Queen Unit Type of Well: WELL WELL X 2. Name of Operator 8. Well No. Energen Resources Corporation 3. Address of Operator 9. Pool name or Wildcat 3300 North "A", Bldg. 4, Suite 100, Midland, Texas 79705 Langlie Mattix 7 Rivers Queen Well Location Grayburg 660 Feet From The ____ South Line and 330 Feet From The East Range 36-E Section Township 23-S NMPM 1 Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3378' KB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: 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. 2-3-99 Perf w/l JSPF @ 3688', 56', 46, 42', 40'. 3638', 3594', 92', 86', & 3581'. Perf follows: 3616-30' (15 holes), 3566-75' (10 holes), 3556-61' (6 holes), 3532-50' (19 holes), & 3512-26' (15 holes) - Total 75 new + 29 exisiting holes. 2-4-99 Acidized w/3000 gals NEFE acid 2-5-99 Swab tested. 2-6-99 Ran production tubing & rods & returned well to production. 2-15-99 Stablizied production @ 3 BO - 50 BW - 3 MCF (GOR 1000) I hereby certify that the information above us true and complete to the best of my knowledge and belief. Production Clerk 8-12-99 SIGNATURE Sharon Crabb TYPE OR PRINT NAME CONCINAL SIGNED BY CHRIS WILL TAME (True space for State Use) AUG 18 DISTRICT I SUPERVISOR

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APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY: