

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

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-025-34919
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. 23
9. Pool name or Wildcat Langlie Mattix 7 RVS/ Queen/ GB
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3387' GL

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 ☐ Gas Well ☐ Other SI WIW

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 J: 1863 feet from the South line and 1950 feet from the East line
Section 22 Township 23S Range 36E NMPM County Lea

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Completion of New Drill, Shut well in. <input checked="" 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 recompletion.

Drilled out down to 3817'. tested casing to 3000# for 15 mins w/ no leak-off. Pumped 400 gals 15% HCL. 500 gals Xylene. & 110 bbls 2% KCL water. Ran CBL/GR/CCL log from WL PBTD of 3824' back up to 2800' FS. The log showed good bond across all intervals to be perforated. Perforated the 7 Rivers/ Queen @ 3626'-3798'. (total of 87-0.44" holes). Acidized w/ 3500 gals 15% HCL/ DI acid. Tested the casing to 500# w/ no leak-off. Swab-tested the well. Installed a 5 1/2" collar, 5 1/2" x 2" casing swage, & a 2" ball valve. Shut well in until the opposition to injection is resolved w/ the offset operator.

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 09/13/00

Type or print name Denise Menoud Telephone No. 915-687-2074

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____
Conditions of approval, if any: