

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.

30-025-22773

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

24695

7. Lease Name or Unit Agreement Name:

Stuart Langlie Mattix Unit

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 Injection

2. Name of Operator

Energex Resources Corporation

3. Address of Operator

3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705

4. Well Location

Unit Letter I : 1420 feet from the South line and 100 feet from the East line

Section 10 Township 25S Range 37E NMPM County Lea

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: ☐

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.

11/18/99-11/19/99: MIRUPU. Isolate casing leak between 1,979' and 2,009'.

11/20/99: Pump 50 sx Cl C cmt w/3% salt, 1% FL-62, 0.3% SMS, & 0.2% CD-32/sack (slurry - 68 cubic feet) at 2,079'.

11/21/99-11/23/99: Drill out cmt to 2,089'. Circulate. Test csg to 500# for 30 minutes w/no leak-off.

11/24/99: Return well to injection.

Note: MIT was mailed to NMOC on 12/1/99. See attached copy of Form C-103.

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

SIGNATURE Judy Bagwell TITLE Production Clerk DATE 4/13/2000

Type or print name Judy Bagwell Telephone No. (915) 687-1155

This space for State use)

APPROVED BY _____ TITLE _____ DATE 100 12 2000

Conditions of approval, if any:

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.	30-025-22773-00-00
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	24695
7. Lease Name or Unit Agreement Name	Stuart Langlie Mattix Unit
8. Well No.	128
9. Pool name or Wildcat	Langlie Mattix 7 RVRs Queen Grayburg
10. Elevation (Show whether DP, RKB, RT, GR, etc.)	

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 Injection
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>I</u> : <u>1420</u> Feet From The <u>South</u> Line and <u>100</u> Feet From The <u>East</u> Line Section <u>10</u> Township <u>25-S</u> Range <u>37-E</u> NMPM Lea County
10. Elevation (Show whether DP, RKB, RT, GR, etc.)	

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 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: Mechanical Integrity Test <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.

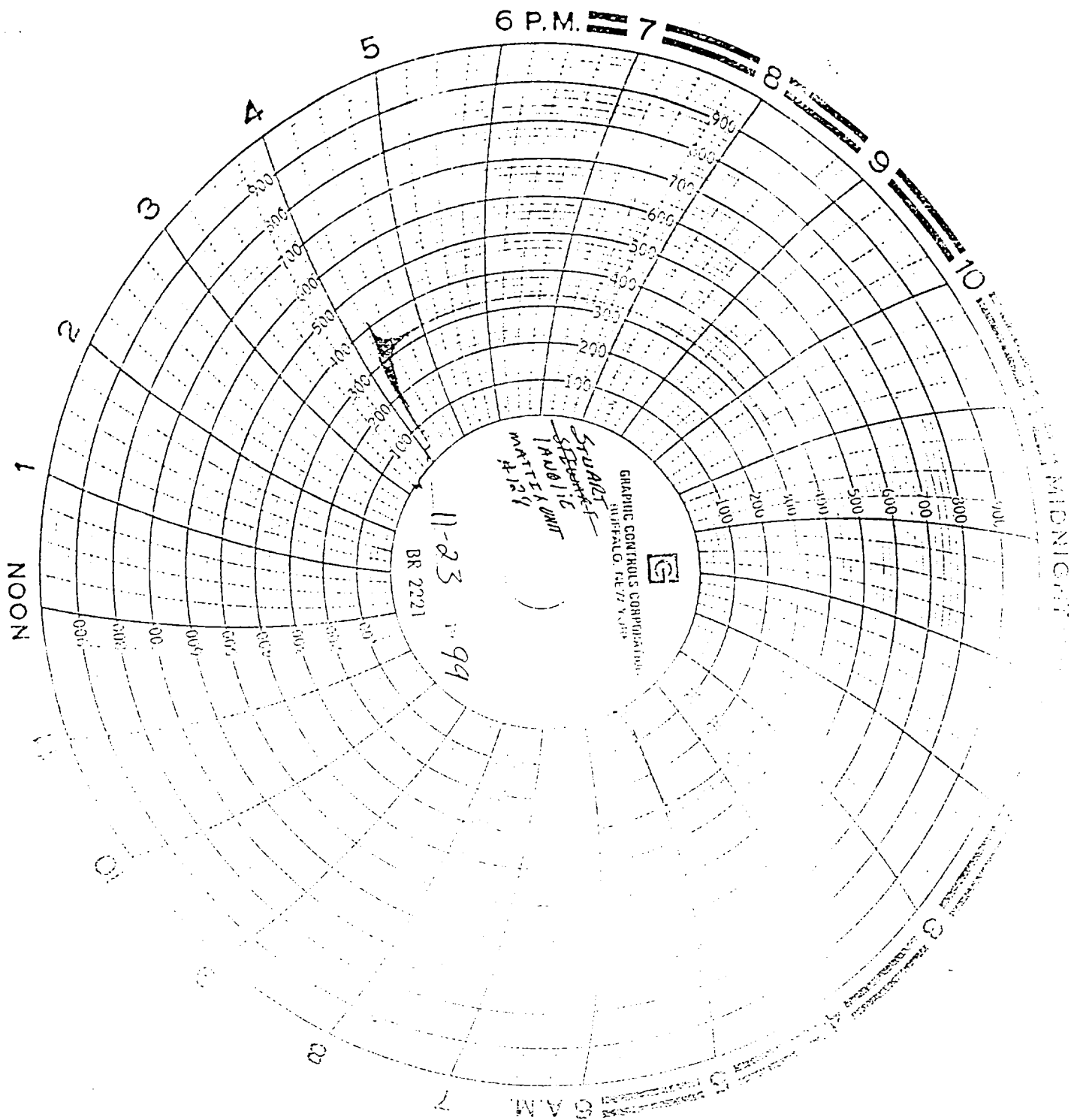
Chart dated 11/23/99 shows pressure held for 30 minutes at 325 PSI.

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

SIGNATURE D. Menoud TITLE Production Tech. DATE 12/1/99
TYPE OR PRINT NAME Denise Menoud TELEPHONE NO. 915-687-1111

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE DEC - 6 1999
CONDITIONS OF APPROVAL, IF ANY:



Atb Transportation Inc
1000 # want
1 Hour clock
Demand 2