| Submit One Copy To Appropriate District | State of New | Mexico | | Form C-103 |
|--|--|--------------------------|---------------------------|--|
| Office District I | Fugurary Minagels and National Description | | Revised November 3, 2011 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| District II 811 S. First St., Artesia, NM 88210 | District II 811 S. First St. Artesia, NM 88210 OIL CONSERVATION DIVISION | | 30-025-35666 | |
| District III 1220 South St. Francis Dr. | | 5. Indicate Typ STATE | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505 | | 6. State Oil & | | |
| 1220 S. St. Francis Dr., Santa Fc, NM 87505 | | | o. state on te | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name | or Unit Agreement Name |
| (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 SESSION PROPOSALS.) | | | MUSTANG MIDGE 28 | |
| Type of Well □Oil Well □ Gas Well □ Other | | | 8. Well Number | er I |
| 2. Name of Operator | | MAY 0 8 2015 | 9. OGRID Nur | nber |
| LEGACT RESERVES OF ERATING LP | | Mu | 240974 | 11/11 |
| 3. Address of Operator PO BOX 10848, MIDLAND, TX 79702 | | RECEIVED | 10. Pool name SHOE BAR; A | |
| 4. Well Location | | KEOE | SHOL BAIK, A | TORA (GAS) |
| Unit Letter H: 1980 feet from the NORTH line and 660 feet from the EAST line | | | | |
| Section 28 Township 16S Range 35E NMPM County LEA | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 3991' GL 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| <u> </u> | | | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | | | | ALTERING CASING |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A | | | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB | | | | 7 |
| | | | | |
| OTHER: | | | | |
| ✓ All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. ✓ Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. | | | | |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the | | | | |
| · · | | | | |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR | | | | |
| <u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.</u> | | | | |
| | | | | |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and | | | | |
| other production equipment. | | | | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | | | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed | | | | |
| from lease and well location. | | | | |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have | | | | |
| to be removed.) All other environmental concerns have been addressed as per OCD rules. | | | | |
| Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- | | | | |
| retrieved flow lines and pipelines. | | | | |
| If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well | | | | |
| location, except for utility's distribution infrastructure. | | | | |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection. | | | | |
| | | | | |
| SIGNATURE XUMATINA | ·TITL | E REGULATORY T | <u>ECH</u> | _DATE <u>05/05/2015</u> |
| TYPE OR PRINT NAME <u>LAURA F</u> | PINA E-MA | AIL:lpina@legacylp | o.com | PHONE: <u>432-689-5273</u> |
| For State Use Only | | <i>(</i> 1) | m [·] | $\int_{-\infty}^{\infty} \int_{-\infty}^{\infty} \int_{-\infty}^{\infty$ |
| APPROVED BY: Ual) | hitaken TITI. | E Compliance | e Officer | DATE 5/11/2015 |
| Conditions of Approval (if any): | | | | |