

Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-31736	✓
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	✓
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name SOUTH JUSTIS UNIT "E"	✓
8. Well Number 240	✓
9. OGRID Number 240974	✓
10. Pool name or Wildcat JUSTIS BLBRY-TUBB-DKRD	
11. Elevation (Show whether DR, 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 ☐ Gas Well ☐ Other INJECTION ☒

2. Name of Operator

LEGACY RESERVES OPERATING LP

3. Address of Operator

PO BOX 10848, MIDLAND, TX 79702

4. Well Location

Unit Letter E : 2250 feet from the NORTH line and 330 feet from the WEST line
Section 25 Township 25S Range 37E NMPM County LEA

12. 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 COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: 5 YEAR MIT TEST-UIC PURPOSES ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

04/07/16 – 5 YEAR MIT. PRESSURE CASING TO 570#, HELD. WITNESSED BY CARL FLOWERS-NMOCD, CHART ATTACHED.

Spud Date:

Rig Release Date:

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

SIGNATURE

Laura Pina

TITLE COMPLIANCE COORDINATOR

DATE 05/04/2016

Type or print name

LAURA PINA

E-mail address: lpina@legacylp.com

PHONE: 432-689-5200

For State Use Only

APPROVED BY:

Bill Seman

TITLE

Staff Manager

DATE

5-25-16

Conditions of Approval (if any):

DATE 4/7/16
BR 2221

coal plant - CPA

Bence
 1000
 Hot
 1000
 3/10/16

District 1
1600 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <u>Legacy Reserves Operating LP</u> ✓		* API Number <u>3002531736</u> ✓
Property Name <u>SJV</u> ✓		Well No. <u>E-240</u> ✓

² Surface Location

UL - Lot <u>E</u>	Section <u>25</u>	Township <u>25S</u>	Range <u>37E</u>	Feet from <u>2250</u>	N/S Line <u>N</u>	Feet From <u>330</u>	E/W Line <u>W</u>	County <u>Lea</u> ✓
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	INJ	INJECTOR SWD	OIL	PRODUCER GAS	DATE <u>4/7/16</u>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<u>Q</u>			<u>Q</u>	<u>Q</u>
Flow Characteristics					
Puff	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	CO2 —
Steady flow	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	WTR ✓
Surges	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	GAS —
Down to nothing	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Type of Fluid
Gas or Oil	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Injected for
Water	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

A-D gas Post Workover and MIT

B8 5.25.14

Signature: <u>Steven Pittman</u>	OIL CONSERVATION DIVISION
Printed name: <u>Steven Pittman</u>	Entered into RBDMS <u>CF</u>
Title:	Re-test
E-mail Address:	
Date: <u>4/7/16</u>	Phone:
	Witness: