State of New Mexico Energy, Minerals and Natural Resources Department

HOBBS OGD

Susana Martinez Governor SEP 2 4 2013

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John H. Bemis Cabinet Secretary

Brett F. Woods, Ph.D. Deputy Cabinet Secretary RECEIVED

Jami Bailey, Division Director Oil Conservation Division



*Deenenee

*Response Required - Deadline

Field Inspection Program "Preserving the Integrity of Our Environment"

24-Sep-13

LEGACY RESERVES OPERATING, LP

P. O. BOX 10848 MIDLAND TX 79702

LETTER OF VIOLATION -

SEP 2 4 2013

Dear Operator:

The following inspection(s) indicate that the well, equipment, location or operational status of the well(s) failed to meet standards of the New Mexico Oil Conservation Division as described in the detail section below. To comply with standards imposed by Rules and Regulations of the Division, corrective action must be taken immediately and the situation brought into compliance. The detail section indicates preliminary findings and/or probable nature of the violation. This determination is based on an inspection of your well or facility by an inspector employed by the Oil Conservation Division on the date(s) indicated.

Please notify the proper district office of the Division, in writing, of the date corrective actions are scheduled to be made so that arrangements can be made to reinspect the well and/or facility.

INSPECTION DETAIL SECTION

LANGLIE JAL UNIT No.005				B-32-24S-37E	30-025-11320-00-	
Inspection				*Significant	Corrective	
Date	Type Inspection	Inspector	Violation?	Non-Compliance?	Action Due By:	Inspection No.
09/24/2013	File and Compliance	Sylvia Dickey	Yes	No	12/28/2013	
iSAD1326735554						

Comments on Inspection:

S/RPT C103 DATED 9/19/2013; "DENIED" WRONG CHART SIZE ETC. ***OPERATOR IN VIOLATION OF NMOCD RULE 19.15.26.11*** NOTE: PLEASE SEE ATTACHED FOR MORE GENERAL INSTRUCTIONS ON TEST CHART REQUIREMENTS. September 24, 2013 Page 2

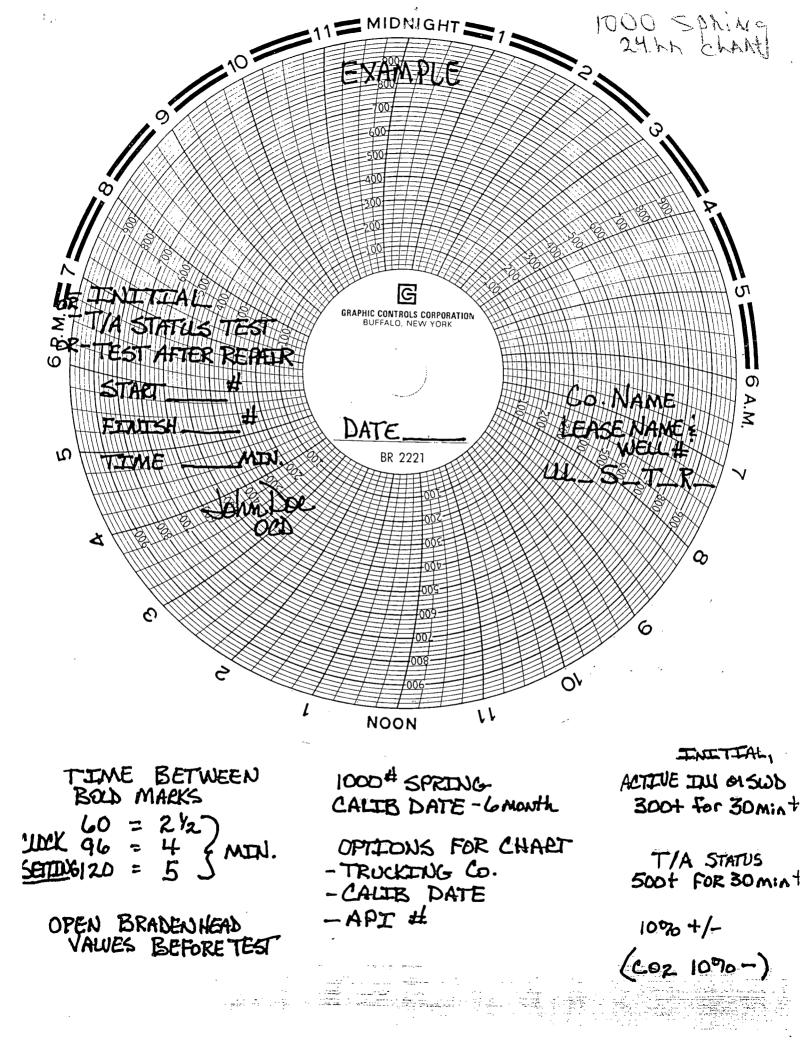
In the event that a satisfactory response is not received to this letter of direction by the "Corrective Action Due By:" date shown above, further enforcement will occur. Such enforcement may include this office applying to the Division for an order summoning you to a hearing before a Division Examiner in Santa Fe to show cause why you should not be ordered to permanently plug and abandon this well.

Sincerely,

Hobbs OCD District Office

COMPLIANCE OFFICER

Note: Information in Detail Section comes directly from field inspector data entries - not all blanks will contain data. *Significant Non-Compliance events are reported directly to the EPA, Region VI, Dallas, Texas.



Submit I Copy To Appropriate District		E (102			
Office State Of I	New Mexico	Form C-103			
	and Natural Resources	Revised July 18, 2013 WELL API NO.			
1625 N. French Dr., Hobbs, NM 882400B55 OCD District II – (575) 748-1283	30-025-11320				
District III = (575) 748-1285 811 S. First St., Artesia, NM 88210 District III = (505) 334-6178 District III = (505) 334-6178	5. Indicate Type of Lease				
	STATE FEE				
1220 S. St. Empire Dr. Santa Fe. NM	, NM 87505	6. State Oil & Gas Lease No. 312452			
87505 DECEIVEL	·····	• · + -			
SUNDRY NOTICES AND REPORTS ON	7. Lease Name or Unit Agreement/Name				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM	LANGLIE JAL UNIT				
PROPOSALS.)	NUECTOR	8. Well Number 5			
1. Type of Well: Oil Well Gas Well Other 1 2. Name of Operator	1. Type of Well: Oil Well Gas Well Other INJECTOR				
LEGACY RESERVES OPERATIN	GLP	9. OGRID Number 240974			
3. Address of Operator		10. Pool name or Wildcat			
P.O. BOX 10848, MIDLAND, TX	79702	LANGLIE MATTIX; 7R-Q-G			
4. Well Location					
Unit Letter <u>B</u> <u>: 990</u> feet from the	<u>NORTH</u> line and	2310 feet from the <u>EAST</u> fine			
Section 32 Township 2	U	NMPM LEA County			
	ether DR, RKB, RT, GR, etc.				
GL GL	3267'				
	1 NI. CNT (
12. Check Appropriate Box to Inc	incate Nature of Notice,	Report or Other Data			
NOTICE OF INTENTION TO:	SUB	SEQUENT REPORT OF:			
PERFORM REMEDIAL WORK 🔲 🛛 PLUG AND ABANDON	REMEDIAL WOR	K 🔲 ALTERING CASING 🗍			
<u> </u>					
OTHER:	OTHER: RAN MI	T & RETURNED WELL TO INJECTION 🛛 🕅			
13. Describe proposed or completed operations. (Clearly	- ,	U 1 7 U			
of starting any proposed work). SEE RULE 19.15.7.1	4 MMAC. For Multiple Co	mpletions: Attach wellbore diagram of			
proposed completion or recompletion.					
9/12/13- NMOCD NOTIFIED, BUT DID NOT WITNES		TEGRITY TEST, PRESSURED CASING			
TO 560 PSI, HELD FOR 30 MINUTES AND RETURNE	D WELL TO INJECTION.				
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Spud Date: , Rig R	elease Date:				
all the set of the set	· · ·				
I hereby certify that the information above is true and complete	e to the best of my knowledg	e and belief.			
SIGNATURE //////TITL	E <u>REGULATORY TEC</u>	<u>CH</u> DATE09/19/13			

Type or print name	MELANIE REYES	E-mail address:	MREYES@LEGACYLP.COM	PHONE:	(432) 689-5200
For State Use Only					

APPROVED BY:		
Conditions of Approval (if any):		

