

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

HOBBS OCS

AUG 17 2015

RECEIVED

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

WELL API NO. 30-025-11761
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SOUTH JUSTIS UNIT <input checked="" type="checkbox"/>
8. Well Number 23
9. OGRID Number 240974
10. Pool name or Wildcat JUSTIS; BLINEBRY-TUBB-DRINKARD
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3066' GR

**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 ☐

2. Name of Operator  
LEGACY RESERVES OPERATING LP

3. Address of Operator  
PO BOX 10848, MIDLAND, TX 79702

4. Well Location  
Unit Letter D : 660 feet from the NORTH line and 990 feet from the WEST line  
Section 25 Township 25S Range 37E NMPM County LEA

12. Check Appropriate Box(es) to Indicate Nature of Notice, Report or Other Data

<b>E-PERMITTING</b> <input checked="" type="checkbox"/> <b>INJECTION</b> <input checked="" type="checkbox"/> <b>CONVERSION</b> <input type="checkbox"/> <b>RBDMS</b> <input checked="" type="checkbox"/> <b>RETURN TO</b> <input type="checkbox"/> <b>TA</b> <input checked="" type="checkbox"/> <b>CSNG</b> <input type="checkbox"/> <b>ENVIRO</b> <input type="checkbox"/> <b>CHG LOC</b> <input type="checkbox"/> <b>INT TO PA</b> <input type="checkbox"/> <b>P&amp;A NR</b> <input type="checkbox"/> <b>P&amp;A R</b> <input type="checkbox"/> <b>CLOSED-LOOP SYSTEM</b> <input type="checkbox"/> <b>OTHER:</b> <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> <b>REMEDIAL WORK</b> <input type="checkbox"/> <b>ALTERING CASING</b> <input type="checkbox"/> <b>COMMENCE DRILLING OPNS.</b> <input type="checkbox"/> <b>P AND A</b> <input type="checkbox"/> <b>CASING/CEMENT JOB</b> <input type="checkbox"/> <b>OTHER: MIT for TA</b> <input checked="" type="checkbox"/>
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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.

07/30/15 Ran MIT, pressure casing to 580#, held for 30 minutes. Witnessed by Bill Sonnamaker-OCD; chart attached.

This Approval of Temporary  
Abandonment Expires 7/30/2016 /

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 REGULATORY TECH DATE 08/13/2015

Type or print name LAURA PINA E-mail address: lpina@legacylp.com PHONE: 432-689-5200

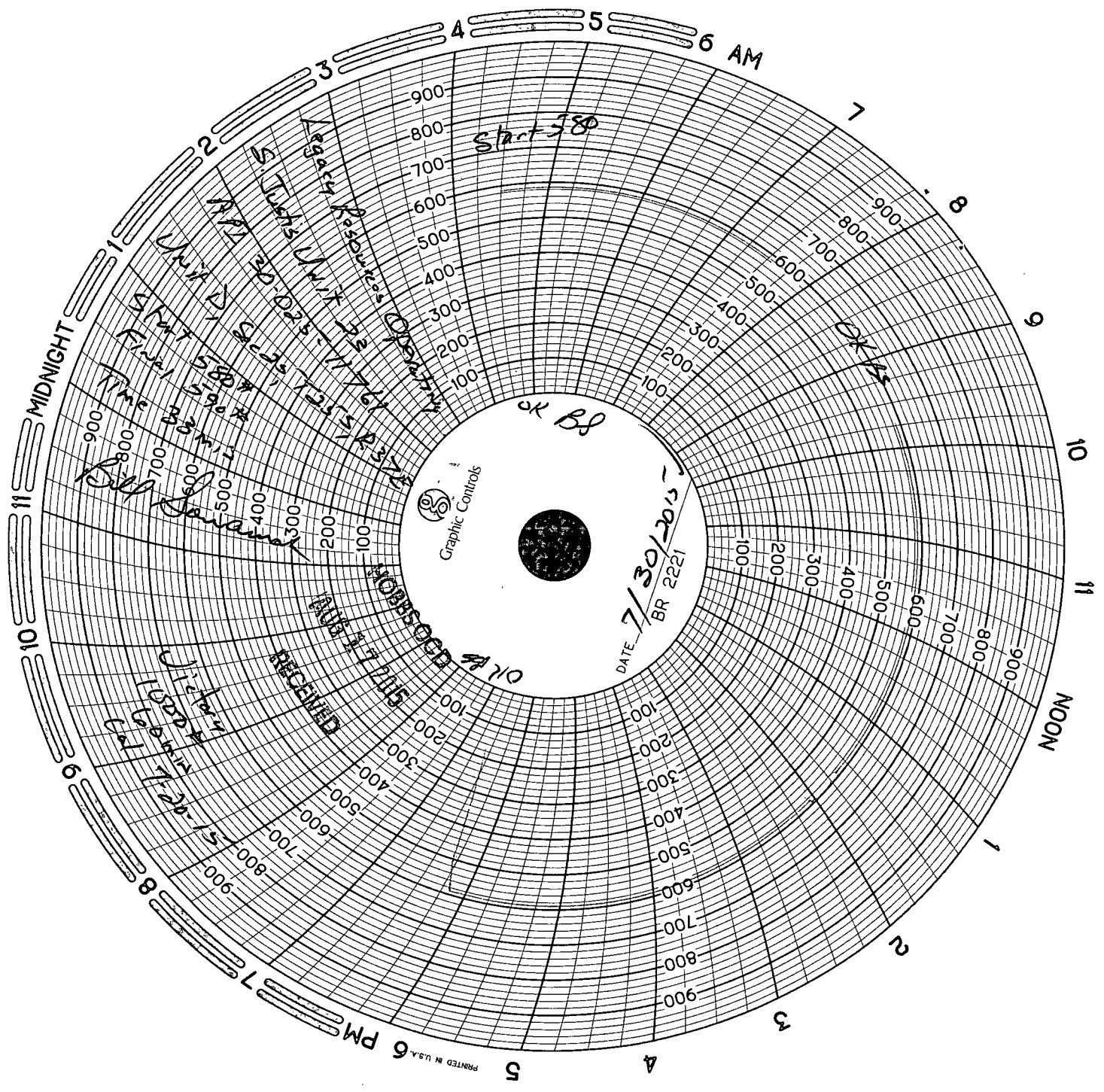
For State Use Only

APPROVED BY: Mary Brown TITLE Dist Supervisor DATE 8/19/2015

Conditions of Approval (if any):

AUG 20 2015

M



Graphic Controls

DATE 7/30/2013  
BR 222

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