

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

HOBBS OGD State of New Mexico
Energy, Minerals and Natural Resources
JUN 10 2013
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
RECEIVED Santa Fe, NM 87505

Form C-103
Revised August 1, 2011

WELL API NO. 30-025-31491	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> <u>Federal</u> <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name SAPPHIRE FEDERAL	
8. Well Number 1	
9. OGRID Number 240974	
10. Pool name or Wildcat SWD; QUEEN	

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 <u>SWD</u>	
2. Name of Operator LEGACY RESERVES OPERATING LP	
3. Address of Operator P.O. BOX 10848 MIDLAND, TX 79702	
4. Well Location Unit Letter <u>J</u> : <u>1600</u> feet from the <u>SOUTH</u> line and <u>1750</u> feet from the <u>EAST</u> line Section <u>23</u> Township <u>19S</u> Range <u>33E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3643' GR	

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ANNUAL MIT TESTING ☒

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.

05/20/13 - ANNUAL MIT. PRESSURE CASING TO 340#, HELD FOR 30 MINS. CHART ATTACHED.

*Spud PSI 365#
fin 320# failed MIT*

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 06/07/2013

Type or print name LAURA PINA E-mail address: _____ PHONE: 432-689-5200
For State Use Only

APPROVED BY: Accepted for Record Only DATE _____

Conditions of Approval (if any):

ELG 6-10-2013

JUN 17 2013

RECEIVED

