

Office

Energy, Minerals and Natural Resources

Revised July 18, 2013

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

MAY 07 2014

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

WELL API NO.

30-025-33285

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

J M DENTON

8. Well Number 14

9. OGRID Number

240974

10. Pool name or Wildcat

DENTON (DEVONIAN)

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 J : 1650 feet from the SOUTH line and 2275 feet from the EAST lineSection 11 Township 15S Range 37E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3792' GL

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: ACIDIZED DEVONIAN ☒

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.

01/31/14: ACIDIZED DEVONIAN PERFS @ 11,062'-11,250' W/3,360 GAL 20% HCl NEAT ACID, 21,210 GAL 20% HCl GELLED ACID & 12,500# RS @ 23.0 BPM. AIP - 5441#, ISIP - 3825#, 5 MIN - 1093#, 10 MIN - 0#.

02/18/14: WELL ON PUMP. 24 HR TEST: 40 BOPD, 30 MCFPD & 585 BWPD.

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 Craig Sparkman TITLE OPERATIONS ENGINEER DATE 05/05/2014Type or print name CRAIG SPARKMAN E-mail address: _____ PHONE: 432-689-5200

For State Use Only

APPROVED BY: Maley Brown TITLE Dist. Supervisor DATE 5/7/2014

Conditions of Approval (if any): _____

MAY 08 2014