Submit 1 Copy To Appropriate District Office	State of New Me			Form C-103
District I - (575) 393-6161	ct I – (575) 393-6161 <b>COBBS D</b> inerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240 District H. (575) 748-1283			WELL API NO.	
BILS. First SL, Artesia, NM 88210 SEP PA MONSERVATION DIVISION		30-005-00973 5. Indicate Type of Lease		
District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE FED FED	
Santa Fe. NM 87505		6. State Oil & Gas Le	4:	
1220 S. St. Francis Dr., Santa Fe, NM 87505	RECEIVED			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Uni	t Agreement Name
(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.)			DRICKEY QUEEN SAND UNIT ~	
1. Type of Well: Oil Well Gas Well Other INJECTION			8. Well Number 16	
2. Name of Operator			9. OGRID Number	
LEGACY RESERVES OPERATING LP  3. Address of Operator			240974  10. Pool name or Wildcat	
PO BOX 10848, MIDLAND, TX 79702			CAPROCK; QUEEN	
4. Well Location				
Unit Letter B: 665 feet from the NORTH line and 1980 feet from the EAST line				
Section 3 Township 14S Range 31E NMPM County CHAVES				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	And the second s			
12. Check	Appropriate Box to Indicate N	ature of Notice, F	Report or Other Dat	a
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				
EMPORARILY ABANDON			<b>=</b>	ND A
PULL OR ALTER CASING				
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM		OTUED.		
OTHER: STEP RATE TEST  13 Describe proposed or com	pleted operations. (Clearly state all t	OTHER:	give pertinent dates, in	cluding estimated date
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.				
				-
SEE ATTACHED				
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PROVIDE S.R.T. RESULTS				
TO SANTA FE FOR APPROVAL				
				ZVAL
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Spud Date:	Rig Release Da	ite:		
71 1 2 2 1 2 1 2 2			11 11 5	
I hereby certify that the information	above is true and complete to the bo	est of my knowledge	and belief.	
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SIGNATURE WWW THE	TITLE	REGULATORY T	ECHDATE_	09/17/2014
The same of the sa	IDADDIA E " '' ''	1-tO1 1	BHOLE	F 420 (00 5000
Type or print name LAU For State Use Only	E-mail addre	ess: <u>lpina@legacyl</u>	o.com PHON	E: <u>432-689-5200</u>
Walnut. Dit Sonia alial				
APPROVED BY: MULLY MOUNT TITLE JUST. SUPEWISOL DATE 4/18/2014				
Conditions of Approval (if any):				
V			CED	1 8 2014
			2EL	T A ==

## Step rate test

- 1. Shut well in a minimum of 48 hours prior to test. If the well is injecting CO2, switch to water a minimum of 2 weeks prior to the test.
- 2. RIH with pressure tool to top of perforations or end of casing in an open hole completion.
- 3. Record static surface pressure and bottom hole pressure.
- 4. Begin injection at 50-150 BWPD. Continue for 15-30 minutes until surface injection pressure gain stabilizes.
- 5. Increase injection rate by a 50-150 BWPD and maintain rate until pressure gain is 1 psi per minute or less. This increase in rate will be used for each step throughout the test. The amount of time is the step length that will be used for the remainder of the test.
- 6. Continue making steps at the same rate increase as number 5. above recording the surface pressure and bottom hole pressure at the end of the step.
- 7. Plot/graph the bottom hole pressure recorded as a function of the rate for each step. Ideally, a plot of two straight lines will be developed where the second straight line has a lower slope than the first. The test is complete when 3 points connect on the second, higher-rate straight line. The intersection of these two lines represents the bottom hole fracture pressure of the well.