Submit One Copy To Appropriate District Office	State of New Mexico		Form C-103
District 1 Energy	Energy, Minerals and Natural Resources		Revised November 3, 2011
	1625 N. French Dr., Hobbs, NM 88240 HOBBS OCD		WELL API NO. 30-025-03689
District II 811 S. First St., Artesia, NM 88210 OIL C	OIL CONCEDUATION DIVISION		5. Indicate Type of Lease
District III BLAY 1 5 2015 220 South St. Francis Dr.		ncis Dr.	STATE STATE STATE
811 S. First St., Artesia, NM 88210  District III  1000 Rio Brazos Rd., Aztec, NM 87410 NAY  District IV  District IV  OIL CONSERVATION DIVISION  Santa Fe, NM 87505		7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr. Santa Fe. NM			
87505 RECEIVED SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name of Omit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		STATE GB	
PROPOSALS.)  1. Type of Well: □ Gas Well □ Other			8. Well Number 1
			9. OGRID Number
2. Name of Operator LEGACY RESERVES OPERATING LP			240974 ·
3. Address of Operator			10. Pool name or Wildcat
PO BOX 10848, MIDLAND, TX 79702			CAUDILL DEVONIAN
4. Well Location			
Unit Letter C: 660 feet from the NORTH line and 1988 feet from the WEST line			
Section 16 Township 15S Range 36E NMPM County LEA			
3907' GL			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRIL			
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT			_ ,_
OTHER:     Description   Descr			
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.			
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.			
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the			
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR			
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR			
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.			
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and			
other production equipment.			
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.			
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with			
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed			
from lease and well location.			
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have			
to be removed.)  All other environmental concerns have been addressed as per OCD rules.			
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Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.			
If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well			
location, except for utility's distribution infrastruc		F	
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When all work has been completed return this for	m to the appropriate [	District office to sche	dule an inspection.
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SIGNATURE NAMED TOTAL	TITLE F	REGULATORY TEC	DATE <u>05/13/2015</u>
<del></del>			
TYPE OR PRINT NAME <u>LAURA PINA</u>	E-MAIL:	lpina@legacylp.c	om PHONE: <u>/432-689-5273</u>
For State Use Onl		_	$\mathcal{C}$
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APPROVED BY:	la (	ompliance (	Officer DATE 00/27/2015