Submit One Copy To Appropriate District Office	State of New Mexico			Form C-103	
District I	Energy, Minerals and Natural Resources			Revised November 3, 2011	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO 30-025-11134		
811 S. First St., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410	1. Aztec, NM 87410 1220 South St. Francis Dr. Santa Fe, NM 87505			☐ FEE ☒	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & O 141560	Bas Lease No.	
	ES AND REPORTS ON W	VELLS	7. Lease Name	or Unit 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.)			COOPER JAL U	/	
1. Type of Well: ⊠Oil Well ☐ Gas Well ☐ Other HOBBS OCD			8. Well Numbe	r 102	
2. Name of Operator			9. OGRID Num	iber	
LEGACY RESERVES OPERATING 3. Address of Operator	i LP	OLD 4 4 SVIB	240974 10. Pool name of	an Wildoot	
PO BOX 10848, MIDLAND, TX 797	/02	- 2 2010		ANGLIE MATTIX; 7RQ-G	
4. Well Location		RECEIVED			
Unit Letter B: 660 feet from the NORTH line and 1980 feet from the EAST line					
Section 18 Township 24S Range 37E NMPM County LEA					
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3202' 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 ALTERING CASING					
TEMPORARILY ABANDON					
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB					
OTHER:					
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					
M steel market 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.					
BRITING	D OIT THE WHITEH	S S S S S S S S S S S S S S S S S S S		7	
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.					
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 re	emaining well on lease: all	electrical service noles ar	d lines have been	removed from lease and well	
location, except for utility's distributio		erectives service poles ar	ia inies nave ecen	temored from fease and well	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.					
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SIGNATURE Jamy ma	TIT	LE_ <u>REGULATORY T</u>	ECH_	_DATE _ <u>09/10/2015</u>	
TYPE OR PRINT NAMELAURA	<u>PINA</u> E-N	MAIL:lpina@legacylp	.com	PHONE: <u>432-689-5273</u>	
For State Use Only	Δ_{1}	<u> </u>	^	DATE 09/17/15	
APPROVED BY: Conditions of Approval (if any):	MitskenTIT	TLE Compliance	Utticar	DATE_09/17/15	

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