Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283	OH CONCEDIATION DUVICION		30-025-38180
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa 1 C, IVIVI 6		6. State Oil & Gas Lease No.
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.)			7. Lease Name or Unit Agreement Name COOPER JAL UNIT
1. Type of Well: Oil Well	Gas Well Other	HOBBSOO	8. Well Number 501 /
2. Name of Operator			9. OGRID Number
3. Address of Operator	ESERVES OPERATING LP	AUG 2 8 2015	240974 10. Pool name or Wildcat
	348, MIDLAND, TX 79702	A C C C C C C C C C C C C C C C C C C C	JALMAT;TAN-YATES-7RVRS/LANGLIE MATTIX;7RVRS-Q-G
4. Well Location		RECEIVED	maria, na qu
Unit Letter <u>D</u>	: 1310 feet from the NOR	<u>ГН</u> line and	feet from the <u>WEST</u> line
Section <u>18</u>	Township 24S	Range 37E	NMPM County LEA
	11. Elevation (Show whether DR, 3300' GR	RKB, RT, GR, etc.))
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data E-PERMITTING INJECTION SUBSEQUENT REPORT OF: P CONVERSION RBDM 1 REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A CASING/CEMENT JOB CASING/CEMENT JOB OTHER: MIT TO PA P&A NR P&A R OTHER: MIT for TA MIT			
Spud Date:	Rig Release Da		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE NUMBER	TITLEREG	ULATORY TECH	DATE_ <u>08/27/2015</u>
Type or print name LAURA PINA E-mail address: lpina@legacylp.com PHONE: 432-689-5200			
For State Use Only			
APPROVED BY: Maley Shown TITLE DIST Supervisor DATE 9/22/2015 Conditions of Approval (if any):			

SEP 2 4 2015

fle

