Schwitz Com To America District		
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103 Revised July 18, 2013
District I - (575) 393-6161	Energy, Minerals and Natural Resources	
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	DEC	WELL API NO.
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	2 2 20-025-32355 5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Francis Dr.	STATE FEE FED
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	CEIVED State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM		CEIVEDState Off & Gas Lease No.
87505		
and the second	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)		SOUTH JUSTIS UNIT "H"
1. Type of Well: Oil Well Gas Well Other INJECTION		8. Well Number 232
2. Name of Operator		9. OGRID Number
LEGACY RESERVES OPERATING LP V		240974
3. Address of Operator PO BOX 10848, MIDLAND, TX 79702		10. Pool name or Wildcat
	48, MIDLAND, 1X 79702	JUSTIS BLBRY-TUBB-DKRD
4. Well Location		
Unit Letter <u>A</u> :	<u>1275</u> feet from the <u>NORTH</u> line and	d <u>150</u> feet from the <u>EAST</u> line
Section 25	Township 25S Range 37	E NMPM County LEA
	11. Elevation (Show whether DR, RKB, RT, GR,	etc.)
		The second s
12. Check A	Appropriate Box to Indicate Nature of Noti	ice, Report or Other Data
NOTICE OF IN	Construction of the second of	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	
TEMPORARILY ABANDON		DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEN	MENT JOB
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM		1.1.1.2 (20.3
OTHER:		PAR MIT TEST-UIC PURPOSES
		s, and give pertinent dates, including estimated date
	ork). SEE RULE 19.15.7.14 NMAC. For Multiple	e Completions: Attach wellbore diagram of
proposed completion or reco	ompletion.	
09/16/15 - 5 YEAR MIT. PRESSUR	RE CASING TO 580#, HELD FOR 30 MINS. WIT	TNESSED BY GEORGE BOWER-NMOCD.
CHART ATTACHE		
		The second se
Spud Date:	Rig Release Date:	
Spud Date.	Mg Release Date.	
	above is two and complete to the best of my linear	ladas and haliaf
I hereby certify that the information i	above is true and complete to the best of my know	redge and bener.
\mathcal{O} $(-)$		
SIGNATURE TOULAND MA	TITLE COMPLIANCE COC	DRDINATOR DATE <u>12/21/2015</u>
SIGNATORE ACCURATION		DATE 12/2013
Type or print nameLAURA P	PINA E-mail address: _lpina@lega	PHONE: 432-689-5200
For State Use Only		
P. O		1
APPROVED BY: Sill Som	memoly TITLE Staff V.	Vlanage DATE 1/5/16
Conditions of Approval (if any):		
		AT NY
	B -4	AN 05 2016
		AN ILS ZITE

