

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|   |
|---|
| WELL API NO.<br>30-025-32407  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>SOUTH JUSTIS UNIT H   |
| 8. Well Number 270  |
| 9. OGRID Number<br>240974   |
| 10. Pool name or Wildcat<br>JUSTIS; BLINEBRY-TUBB-DRINKARD  |

|   |  |
|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.)                |  |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION  |  |
| 2. Name of Operator<br>LEGACY RESERVES OPERATING LP   |  |
| 3. Address of Operator<br>PO BOX 10848, MIDLAND, TX 79702   |  |
| 4. Well Location<br>Unit Letter <u>A</u> : <u>1100</u> feet from the <u>NORTH</u> line and <u>220</u> feet from the <u>EAST</u> line<br>Section <u>36</u> Township <u>25S</u> Range <u>37E</u> NMPM County <u>LEA</u> |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3044' GR  |  |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:   |  |
|--|---|---|--|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                                | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>                      | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>                            |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |   |   |  |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>    |   |   |  |
| OTHER: <input type="checkbox"/>                |   | OTHER: PRESSURE TEST-UIC PURPOSES <input checked="" type="checkbox"/> |  |

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.

10/31/18 - RAN MIT, PRESSURE CASING TO 550#. WITNESSED BY GEORGE BOWER-NMOCD, CHART ATTACHED.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Laura Pina TITLE COMPLIANCE COORDINATOR DATE 11/28/2018

Type or print name LAURA PINA E-mail address: lpina@legacylp.com PHONE: 432-689-5200

For State Use Only

APPROVED BY: Rick Rickman TITLE Compliance Officer DATE 12-7-18

Conditions of Approval (if any):

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

HOBBS 000  
DEC 07 2018  
RECEIVED

|                                      |  |                                   |
|--------------------------------------|--|-----------------------------------|
| Operator Name<br><i>Legacy</i>       |  | API Number<br><i>30-025-32407</i> |
| Property Name<br><i>South Justis</i> |  | Well No.<br><i>270</i>            |

7. Surface Location

|                      |                      |                        |                     |                          |                      |                         |                      |                      |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------|
| BL - Lot<br><i>A</i> | Section<br><i>36</i> | Township<br><i>25S</i> | Range<br><i>37E</i> | Feet from<br><i>1100</i> | N/S Line<br><i>N</i> | Feet From<br><i>220</i> | E/W Line<br><i>E</i> | County<br><i>LCA</i> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

|                  |           |                |           |                        |     |     |                 |                         |
|------------------|-----------|----------------|-----------|------------------------|-----|-----|-----------------|-------------------------|
| TA'D WELL<br>YES | <i>NO</i> | SHUT-IN<br>YES | <i>NO</i> | INJECTOR<br><i>INJ</i> | SWD | OIL | PRODUCER<br>GAS | DATE<br><i>10/31/18</i> |
|------------------|-----------|----------------|-----------|------------------------|-----|-----|-----------------|-------------------------|

OBSERVED DATA

|                      | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csng | (E)Tubing     |
|----------------------|------------|--------------|--------------|--------------|---------------|
| Pressure             | <i>φ</i>   | <i>—</i>     | <i>—</i>     | <i>φ</i>     | <i>φ</i>      |
| Flow Characteristics |            |              |              |              |               |
| Puff                 | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | CO2 <i>—</i>  |
| Steady Flow          | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | WTR <i>—</i>  |
| Surges               | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | GAS <i>—</i>  |
| Down to nothing      | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | Type of Fluid |
| Gas or Oil           | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | Injected for  |
| Water                | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>   | Waterflood if |
|                      |            |              |              |              | applies       |

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

|                       |        |                           |  |
|-----------------------|--------|---------------------------|--|
| Signature:            |        | OIL CONSERVATION DIVISION |  |
| Printed name:         |        | Entered into RBDMS        |  |
| Title:                |        | Re-test <i>RR</i>         |  |
| E-mail Address:       |        |                           |  |
| Date: <i>10/31/18</i> | Phone: |                           |  |
| Witness: <i>Bauer</i> |        |                           |  |

INSTRUCTIONS ON BACK OF THIS FORM

