

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. 30-025-38180
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name COOPER JAL UNIT
8. Well Number 501
9. OGRID Number 240974
10. Pool name or Wildcat JALMAT;TAN-YATES-7RVRS/LANGLIE MATTIX;7RVRS-Q-G

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	7. Lease Name or Unit Agreement Name COOPER JAL UNIT
2. Name of Operator LEGACY RESERVES OPERATING LP	8. Well Number 501
3. Address of Operator PO BOX 10848, MIDLAND, TX 79702	9. OGRID Number 240974
4. Well Location Unit Letter <u>D</u> : <u>1310</u> feet from the <u>NORTH</u> line and <u>1248</u> feet from the <u>WEST</u> line Section <u>18</u> Township <u>24S</u> Range <u>37E</u> NMPM County <u>LEA</u>	10. Pool name or Wildcat JALMAT;TAN-YATES-7RVRS/LANGLIE MATTIX;7RVRS-Q-G
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3300' 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: MIT for TA extension <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.

09/12/19 Ran MIT, pressure casing to 560#. OCD notified, unable to witness, chart attached.

FINAL TA STATUS- EXTENSION
Approval of TA EXPIRES: 9-12-20
Well needs to be PLUGGED OR RETURNED
to PRODUCTION
BY THE DATE STATED ABOVE: XZ

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 09/26/2019

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

For State Use Only

APPROVED BY: Key Fat TITLE C.O. A DATE 10-10-19
Conditions of Approval (if any):

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

BRADENHEAD TEST REPORT

Operator Name Legacy Reserves		API Number 30-025-38180	
Property Name Looper Jal Unit		Well No. 501	

Surface Location									
UL - Lot D	Section 18	Township 24S	Range 37E		Feet from 1300	N/S Line N	Feet From 1248	E/W Line W	County Lea

Well Status						DATE
<input checked="" type="radio"/> YES	TA'D WELL	NO	<input checked="" type="radio"/> YES	SHUT-IN	NO	INJ
						SWD
						<input checked="" type="radio"/> OIL
						GAS
						9-12-19

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure				100	0
Flow Characteristics					
Puff	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	CO2 <input type="checkbox"/>
Steady Flow	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	WTR <input type="checkbox"/>
Surges	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	GAS <input type="checkbox"/>
Down to nothing	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	Type of Fluid
Gas or Oil	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input checked="" type="radio"/> N	Injected for
Water	<input type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	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.

D. Had pressure took few minutes to Blow down, blew down to 0 psi

Signature: Dustin Reeder		OIL CONSERVATION DIVISION	
Printed name: Dustin Reeder		Entered into RBDMS	
Title: Prod Tech		Re-test	
E-mail Address: dreeder@legacyreserves		X 7	
Date: 9-12-19	Phone:		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM

PRINTED IN U.S.A.

PM

MIDNIGHT

AM

NOON

DATE
BR 2221
501

Cooper JAL Unit
9-12-19

TA Status Test
Legacy Reserves
Cooper JAL Unit

30-025-38180

018 245 315

5000 Bm 50000

5000 Bm 50000
5000 Bm 50000
5000 Bm 50000
5000 Bm 50000

(Name) (Name)

5000 Bm 50000
5000 Bm 50000
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