

Submit 3 Copies To Appropriate District Office
District I
1625 N French Dr., Hobbs, NM 88210
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

RECEIVED

JAN 22 2009

HOBBSOCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-20081 ✓
5. Indicate Type of Lease
STATE FEE ✓
6. State Oil & Gas Lease No. NMJ-540

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.)
1. Type of Well: Oil Well Gas Well Other
2. Name of Operator LEGACY RESERVES OPERATING LP ✓
3. Address of Operator P.O. BOX 10848 MIDLAND, TX 79702

7. Lease Name or Unit Agreement Name SOUTH JUSTIS UNIT ✓
8. Well Number ~~19~~ ✓
9. OGRID Number 240974 ✓
10. Pool name or Wildcat JUSTIS-BLINEBRY-TUBB-DRINKARD ✓

4. Well Location
Unit Letter C : 660 feet from the NORTH line and 2310 feet from the West line. ✓
Section 23 Township T25S Range R37E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3090.8' GR

Pit or Below-grade Tank Application or Closure
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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 checked="" 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"/>	
OTHER: RETURN TO PRODUCTION <input checked="" type="checkbox"/>		OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion

ESTIMATED START DATE: 1/26/09

MIRU. Install BOP. RIH w/ 4 3/4" bit, DC's and tbg. DO cmt retainer at 3809'. Run csg inspection log. RIH w/ pkr and RBP and pressure test csg. Swab test any potential csg leaks for inflow rate. Cmt squeeze csg leaks as necessary. DO cmt squeeze. Run GR/CNL/CCL log. Rlh w/ tbg, rods and pump to 5800'. Put well on pumping production. RD.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Kent Williams TITLE: Senior Engineer DATE: 1/20/09

Type or print name Kent Williams E-mail address: _____ Telephone No. (432) 689-5200

APPROVED BY: [Signature] TITLE: PETROLEUM ENGINEER DATE: JAN 26 2009

Conditions of Approval (if any): _____