

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural
Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
August 1, 2011

Permit 162970

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.)		WELL API NUMBER 30-015-40865
1. Type of Well: O		5. Indicate Type of Lease P
2. Name of Operator LEGEND NATURAL GAS III LIMITED PARTNERSHIP		6. State Oil & Gas Lease No.
3. Address of Operator 15021 Katy Freeway, Suite 200, Houston, TX 77094		7. Lease Name or Unit Agreement Name HIGH BRASS
4. Well Location Unit Letter <u>C</u> : <u>330</u> feet from the <u>S</u> line and <u>2256</u> feet from the <u>W</u> line Section <u>20</u> Township <u>24S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well Number 002H
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3066 GR		9. OGRID Number 258894
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <u>Drilling/Cement</u> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.
02/21/2013-Ran 5/12" 17# P-110 csg. Set at 12630'. Cmt w/ 20 bbls Mud flush III 8.4 ppg, 20 bbl Gel spacer, 30 bbl water spacer, 8.34 ppg, 950 sks Lead Versacem H 11.8 ppg, 2.42 yield 8% Bentonite, 2% salt, .3% CFR-3, .25 lbm D-Air 5000, 5 lbm Kol-Seal, .125 lbm Poly-e-flake, .45% HR-601, 13.531 gal fresh water/ 1460 sks Tail Versacem H .5 Halad(R)-344, .4% CFR-3, 1% salt, 5.469Gal fresh water, displace with 291 bbls fresh water, bump plug w. 500 psi over, floats held, bled back 2.5 bbls, Lost returns with 30 bbls red dye spacer circ to surface. PT Test to 5000 psi, ok 2/5/2013 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Drop	Open Hole
02/05/13	Surf	FreshWater	17.5	13.375	48	J-55	0	400	400	1.35	H	0	1375	0	Y
02/09/13	Int1	CutBrine	12.25	9.625	36	J-55	450	2505	750	1.35	C	0	2800	0	N
02/21/13	Prod	CutBrine	8.75	5.5	17	P-110	25	12630	950	2.42	H	0	5000	0	N
02/21/13	Prod	CutBrine	8.75	5.5	17	P-110	7500	12630	1460	1.23	H	0	5000	0	N

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Regulatory Analyst DATE 2/25/2013
Type or print name Michael Becci E-mail address jmosley@lng2.com Telephone No. 817-872-7822

For State Use Only:
APPROVED BY: Randy Dade TITLE District Supervisor DATE 2/26/2013 11:00:09 AM