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 164241

WELL API NUMBER	30-015-40906
5. Indicate Type of Lease	S
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	FULL CHOKE COM
8. Well Number	002H
9. OGRID Number	258894
10. Pool name or Wildcat	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: O

2. Name of Operator: LEGEND NATURAL GAS III LIMITED PARTNERSHIP

3. Address of Operator: 15021 Katy Freeway, Suite 200, Houston , TX 77094

4. Well Location
Unit Letter M : 330 feet from the S line and 380 feet from the W line
Section 32 Township 24S Range 28E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3038 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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		Other: **Drilling/Cement**	☒

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.

03/13/2013- Ran 5 1/2, 17#, P-110 casing to 12721'MD.

03/14/2013-Cement 5 1/2 csg as follows, Lead W/ 750 sx Class-H 50/50 POZ, 10% gel, 1% SMS, .8% ASA-301, 2% A-10, 5% Salt, .9% R-3, 5 lb/sx LCM-1, .125 lb/sx Cello Flake, .005% Static Free 11 ppg, yld, 3.389. Tail W/ 1600 sx Class-H 50/50 POZ,2% gel, .50% FL-25, .50% FL-52, .30% SMS, .20% R-3, .005% Static Free, 5% Salt, 14.4 ppg, yld 1.258, Bumped plug w 500 psi over 2471 psi, float didnt hold, circ 75 bbls cement back to surface, full circ through out job

3/14/2013-Rig Release @ 18:00 hrs.**2/25/2013** 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
02/26/13	Surf	FreshWater	17.5	13.375	48	J-55	0	421	461	1.35	C	0	500	0	N
03/01/13	Int1	CutBrine	12.25	9.625	36	J-55	0	2545	747	1.91	C	0	500	0	N
03/01/13	Int1	CutBrine	12.25	9.625	36	J-55	0	2545	255	1.34	C	0	500	0	N
03/13/13	Prod	CutBrine	8.75	5.5	17	P-110	0	12721	750	3.389	H	0	2971	0	N
03/13/13	Prod	CutBrine	8.75	5.5	17	P-110	7140	12721	1600	1.258	H	0	2971	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 NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Electronically Signed TITLE Regulatory Analyst DATE 3/18/2013

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 3/18/2013 12:31:01 PM