

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, 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-141
Revised August 8, 2011

Oil Conservation Division
1220 South St. Francis Dr.,
Santa Fe, NM 87505

Submit 1 Copy to appropriate District Office in
accordance with 19.15.29 NMAC.

Release Notification and Corrective Action

11AB1425833935 **240974** **OPERATOR** ☒ Initial Report ☐ Final Report

Name of Company Legacy Reserves	Contact Jesse Garcia	
Address P.O Box 10848 Midland Texas 79702-7848	Telephone No. 432-853-3535	
Facility Name Midnight Matador A 1	Facility Type Well head <i>Battery - Flowline</i>	
Surface Owner	Mineral Owner	API No. <i>30-015-34385</i>

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
	35	17S	27E	1896	North	2000	East	Eddy

Latitude *32.792723* Longitude *104-246997*

NATURE OF RELEASE

Type of Release Oil and Water	Volume of Release 20 bbls	Volume Recovered 5 bbls
Source of Release Flowline	Date and Hour of Occurrence 8/25/2014	Date and Hour of Discovery 8/25/14 7:00 AM
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Heather Patterson	
By Whom? Jesse Garcia	Date and Hour 8/25/14 9:00 AM	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	

If a Watercourse was Impacted, Describe Fully.*

NM OIL CONSERVATION
ARTESIA DISTRICT

Describe Cause of Problem and Remedial Action Taken.*
Poly flow busted during lighting storm. Fluid was pick up, and flowline repaired



SEP 14 2014

RECEIVED

Describe Area Affected and Cleanup Action Taken.*

A area of 60' X 80' was affected, some of the area had a light covering. All the area was picked up and taken to a state approved Facility. Fresh dirt was put in its place.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	OIL CONSERVATION DIVISION	
Printed Name: Jesse Garcia	Approved by Environmental Specialist: 	
Title: Foreman	Approval Date: <i>9/15/14</i>	Expiration Date: <i>NA</i>
E-mail Address: jgarcia@legacyp.com	Conditions of Approval: Remediation per OCD Rule & Guidelines.	
Date: 9/10/2014 Phone: 432-853-3535	Attached <input type="checkbox"/>	

SUBMIT REMEDIATION PROPOSAL NO
LATER THAN: *10/15/14*

28P-2485

* Attach Additional Sheets If Necessary

ENVIRONMENTAL RELEASE NOTIFICATION

Call-In Sheet

Date: 8/25/14

_____ from Legacy
(Person Reporting) (Company)

is reporting a release at the Roadside County Rd. 225 ~ 1 mile south
(Site) of 82

API# _____, Sec. _____ T _____ - R _____.

Occurred on: 8/24/14 at Unkn Late night
(Date of Occurrence) (Time of Occurrence) AM/PM.

Volume released: ~20 bbls

C-141 received: _____

Volume recovered: -

2RP- _____

Briefly Describe Cause of Problem and action taken: lightning hit flow
lines - also some oxy lines were
hit

(_____) (Initials)

called

FLARE NOTIFICATION Call-In Sheet

Jessie Garcia

9/10/14 - will send

432-853-3535

Date: _____ today!

jgarcia@legacylp.com

Report Flare for _____ from _____
(Reporting Company) (Person Reporting)

Occurred on: _____ at _____ AM/PM.
(Date) (Time of Occurrence)

C-129/C-141 received: _____

Flared Inlet Gas for: Will email Monday 9/15

Total MCF: had trouble w/ email

Briefly Describe Cause of Problem and action taken: _____

(_____) (Initials)