Submit I Copy To Appropriate District Office	State of N			Form C-103
District 1 – (575) 393-6161	Energy, Minerals a	and Natu	ral Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERV			30-015-40867 5. Indicate Type of Lease
District 111 - (505) 334-6178	1220 South	St. Fran	ncis Dr.	STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe	, NM 87	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM				
87505	CEC AND DEPÓDITE ON	IWELLO		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON SALS TO DRILL OR TO DEEP	EN OR PLI	UG BACK TO A	7. Lease Name of Onit Agreement Name
DIFFERENT RESERVOIR. USE "APPLIC	CATION FOR PERMIT" (FORM	4 C-101) FC	OR SUCH	HIGH BRASS
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other			8. Well Number 2H
2. Name of Operator	Gas Well Office			9. OGRID Number
LEGEND NATURAL GAS III, LP				258894
3. Address of Operator				10. Pool name or Wildcat
15021 KATY FREEWAY, SUITE 200, HOUSTON, TX 77094				WILLOW LAKE; BONE SPRING
4. Well Location				
Unit Letter N :	330 feet from the S	line a	and 2256 feet	from the W line
Section 20	Township 2			MPM EDDY County
200	11. Elevation (Show who			
	3066	,	, , ,	
			,	
12. Check A	Appropriate Box to Inc	licate N	ature of Notice.	Report or Other Data
			1	•
NOTICE OF IN		_		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	1		REMEDIAL WOR	
TEMPORARILY ABANDON	CHANGE PLANS	X	COMMENCE DRI	
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMEN	T JOB U
DOWNHOLE COMMINGLE				
OTHER:		П	OTHER:	П
	leted operations. (Clearly	state all		d give pertinent dates, including estimated date
of starting any proposed wo	rk). SEE RULE 19.15.7.1	I4 NMAC	C. For Multiple Co	mpletions: Attach wellbore diagram of
proposed completion or reco			·	•
CVALVONIO PROPUGIIVOVO A APP		D 0 1 1 0 0	#: OF # 1 0 # 1	65 No 511 7661 NW 1 55 657
CHANGING PRODUCTION CASI	NG CEMENTING JOB F	ROM 2 S	TAGES TO I STA	GE; NO DV TOOL WILL BE SET.
WILL NOT SET DV TOOL ORIG.	@ 2700'			
WIEL NOT SET DV TOOL ONG.	<i>w 2100</i>			
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				FEB 1 2 2013
				ADTESIA
				NMOCD ARTESIA
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Spud Date: 02/05/2013		Rig	Release Date: N/	'A
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I hereby certify that the information a	above is true and complete	to the be	est of my knowledg	e and belief.
	1 1			
CYCLIATION ()	Malla K TITT	r pr	TOTIL ATTORNA AND	1110T D. 1777 00/10/0010
SIGNATURE SHIPLY ALL	MARLY TITL	ERE	GULATORY ANA	ALYSTDATE02/12/2012
Type or print name_JENNIFER MQ	ISLEY E-mail address	imoslev@	alng2 com	PHONE: \$17-872-7822
For State Use Only	I man address.	يا لا ماده ما در	7	1 1
	Cara I	/	Los /	7/12/200
APPROVED BY:	GIUL I TITLE	3 <u> </u>	BO10451	DATEDATE
Conditions of Approval (if any):	<i> </i>	-0-	1.	7,1