Submit 1 Copy To Appropriate District Form C-103 State of New Mexico Office Revised August 1, 2011 Energy, Minerals and Natural Resources District 1-(575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-015-22894 District II - (575) 748-1283 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease District III - (505) 334-6178 1220 South St. Francis Dr. STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (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 STATE GQ COM 8. Well Number 1. Type of Well: Oil Well Gas Well Other SWD 1 SWD 2. Name of Operator 9. OGRID Number LEGEND NATURAL GAS III, LIMITED PARTNERSHIP 217955 10. Pool name or Wildcat 3. Address of Operator 15021 KATY FREEWAY, SUITE 200, HOUSTON, TX 777094 SALT DRAW (BONE SPRING) 4. Well Location 1980 feet from the Unit Letter 1980 feet from the S line and Section Township 25S Range 28E NMPM County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 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 ALTERING CASING □ **CHANGE PLANS** COMMENCE DRILLING OPNS. P AND A **TEMPORARILY ABANDON** MULTIPLE COMPL CASING/CEMENT JOB PULL OR ALTER CASING DOWNHOLE COMMINGLE OTHER: NOTICE OF INJECTION OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. 4/4/2013- BEGAN INJECTING WATER 3000 BBLS/DAY @ 600 PSI; INTECTED 1000 BBLS ON 4/4/2013 WELL MUST BE SHUT-IN OPGLATOR DOES NOT HAVE PERMISSION TO also 6/15/1979; P&A'D 7/31/1979 04/01/1979 Spud Date: Rig Release Date: DEEPEND 09/04/2004 I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE SR. REGULATORY ANALYST DATE Type or print name JENNÏFER MOSLEY E-mail address: \_jmosley@lng2.com\_\_\_ PHONE: For State Use Only

TITLE

APPROVED BY:

Conditions of Approval (if any):