Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resource	Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 #	OIL CONCEDIATION DIVISION	20.015.41401
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	*
1000 Rio Brazos Rd., Aztee, NM 87410	Santa Fe, NM 87505	5. Indicate Type of Lease
District IV — (505) 476-3460, 1220 S. St. Francis Dr., Santa Fc, NM	Salita PC, INVI 67303	STATE X FEE
87505		o. State Off & Gas Lease No.
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	COBI GIMID OND
PROPOSALS.)	_	, 8. Well Number 4
1. Type of Well: Oil Well X G	as Well Other	A CONTRAL L
LEGEND NATURAL GAS III, LP		9. OGRID Number 258894
3. Address of Operator		10. Pool name or Wildcat
15021 KATY FREEWAY, SUITE	200, HOUSTON, TX 77094	SWD; DELAWARE
4. Well Location		
Unit Letter C: 1066 feet from the N line and 850 feet from the W line		
Section 5 Township 25S Range 28E NMPM EDDY County		
The state of the s	11. Elevation (Show whether DR, RKB, RT, GI	R, etc.)
E STATE OF S	3031 GR	
12 Cheek Appropriate Pay to Indicate Nature of Notice Report or Other Date		
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		
TEMPORARILY ABANDON		
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CE	EMÊNT JOB 🗍 .
DOWNANCE COMMINGEE		•
OTHER:	☐ OTHER:	BEGAN INJECTION X .
		ils, and give pertinent dates, including estimated date
proposed completion or reco	rk). SEE RULE 19.15.7.14 NMAC. For Multip	de Completions: Attach wellbore diagram of
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10/04/2013-BEGAN INJECTION		RECEIVED
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Spud Date: 08/01/2013	Rig Release Date: 08/22/	/2013
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
	20 %	** **
SIGNATURE IN //	TITLE OF PROJECT ATON	N ANTAL NOT DATE 00/01/00/0
SIGNATURETITLE_SR. REGULATORY ANALYSTDATE07/01/2013		
Type or print nameJENNIFER MOSLEY E-mail address:jmosley@lng2.com PHONE:817-872-7822		
For State Use Only		
ADDROVED DV. ALL Y	Il was Ilst	x DIVIGO man inklis
APPROVED BY: Conditions of Approval (if any):	TITLE DIVAC	(JUISO) DATE 10/4/13
zaminono or repprover (ii any).		,