

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-22894
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State GQ Com
8. Well Number 01
9. OGRID Number 258894
10. Pool name or Wildcat Delaware; SWD

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3052' GR
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SUNDRY NOTICES AND REPORTS ON WELLS
(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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other: SWD

2. Name of Operator
LEGEND NATURAL GAS III, LP

3. Address of Operator
15021 KATY FREEWAY, SUITE 200, HOUSTON, TX 77094

4. Well Location
Unit Letter J : 1980 feet from the S line and 1980 feet from the E line
Section 7 Township 25S Range 28E NMPM EDDY County

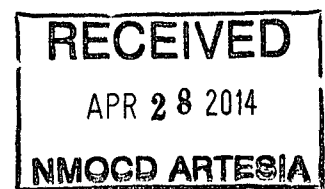
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND'A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

04/25/2014- RIG UP ON STATE GQ COM 01-SWD WELL; PULLED TUBING AND PACKER. TUBING HAD LEAK, LAID ALL TUBING DOWN AND HAVE SHUT DOWN WELL UNTIL NEW COATED TBNG CAN BE RUN, APPROX 3-4 WEEKS

CONVERTED TO SWD WELL ON 03/10/2013



Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jennifer Elrod TITLE SR. REGULATORY ANALYST DATE 04/28/2014
Type or print name JENNIFER ELROD E-mail address: jelrod@lng2.com PHONE: 817-872-7822
For State Use Only

APPROVED BY: Richard Inge TITLE Asst. Reg. Supervisor DATE 4/28/14
Conditions of Approval (if any):

* Contact OCD for MIT test after Packer is set:
Contact Richard Inge @ 575-748-1283