Submit One Copy To Appropriate District	State of New Mexico	Form C-103 Revised November 3, 2011			
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO. 30-015-00658			
District II	OIL CONSERVATION DIVISION	30 013 00030			
811 S. First St., Artesia, NM 88210 District III	1220 South St. Francis Abr. 1 6 201	4 5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE			
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	NMOCD ARTI	ESIA State Oil & Gas Lease No.			
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name			
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	SOUTH RED LAKE II UNIT				
1. Type of Well: \(\sum Oil Well \)	Gas Well Other	8. Well Number 13			
2. Name of Operator	CERVES OPEN ATTICAL P	9. OGRID Number			
LEGACY RES	240974 10. Pool name or Wildcat				
PO BOX 1084	RED LAKE;QUEEN-GRAYBURG-SA				
4. Well Location		·			
Unit Letter E : 2310	feet from the <u>NORTH</u> line and <u>990</u>	feet from the WESTline			
	17S Range 27E NMPM County _				
ವರಾಂ. ರಾವರಿ ಕಾರ್ಯವರ್ಷ ವಿಧಾನಿಕ್ಕಾಗಿ ಪ್ರವರ್ಥಿಸಿದ್ದಾರೆ. ಪ್ರತಿ ಕ್ರೀ ಪ್ರಿ ಕ್ರೀ ಪ್ರತಿ ಕ್ರೀ ಪ್ರಿ ಕ್ರೀ ಪ್ರತಿ ಕ್ರಿಸಿ ಕ್ರೀ ಪ್ರತಿ ಕ್ರೀ ಪ್ರತಿ ಕ್ರಿಸಿ ಕ್ರೀ ಪ್ರತಿ ಕ್ರಿಸಿ ಕ್ರಿ	11. Elevation (Show whether DR, RKB, RT, GR, e 3580' GR	(f.C.)			
12. Check Appropriate Box to	Indicate Nature of Notice, Report or Other	Data			
	*				
NOTICE OF INT		JBSEQUENT REPORT OF: □ ALTERING CASING □			
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐	PLUG AND ABANDON REMEDIAL WO	DRILLING OPNS. P AND A			
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	_			
OTHER.		· · · · · · · · · · · · · · · · · · ·			
OTHER: ☐ All pits have been remediated in	compliance with OCD rules and the terms of the O	s ready for OCD inspection after P&A			
Rat hole and cellar have been fill	led and leveled. Cathodic protection holes have be	en properly abandoned.			
A steel marker at least 4" in diam	neter and at least 4' above ground level has been se	t in concrete. It shows the			
OPERATOR NAME. LEA	SE NAME, WELL NUMBER, API NUMBER, (OUARTER/OUARTER LOCATION OR			
UNIT LETTER, SECTION	N, TOWNSHIP, AND RANGE. All INFORMAT				
PERMANENTLY STAMP	ED ON THE MARKER'S SURFACE.				
	nearly as possible to original ground contour and h	as been cleared of all junk, trash, flow lines and			
other production equipment.		•			
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with					
	tor's pit permit and closure plan. All flow lines, pr				
from lease and well location.					
All metal bolts and other material to be removed.)	s have been removed. Portable bases have been re-	moved. (Poured onsite concrete bases do not have			
	s have been addressed as per OCD rules.				
Pipelines and flow lines have bee	en abandoned in accordance with 19.15.35.10 NMA	AC. All fluids have been removed from non-			
retrieved flow lines and pipelines.	remaining well on lease: all electrical service poles	and lines have been removed from lease and well			
location, except for utility's distribution		and mes have been removed from lease and wen			
When all work has been completed, re	eturn this form to the appropriate District office to s	schedule an inspection.			
CICNATURE V ,					
SIGNATURE have be	TITLE OPERATIONS SC	JPERINTENDENT_DATE 05/08/2014			
TYPE OR PRINT NAME <u>KEVIN B</u>	RACEY E-MAIL:	PHONE: 432-689-5200			
For State Use Only					
APPROVED BY). NOT REARY TO BO	DATE			
Conditions of Approval (if any):	2 NOT REARY TUR.	5 RECEASAN			
SOE ATTACHET). / / · · · · · · · · · · · · · · · · ·	-W			
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Normal Routine Activity Type Routine/Periodic Notification Type Che Date Performed 5/28/2014	Ŭ.	Current Type: O Status	Fac/Rid] **	Eddy TWG1414838032 NA Type Status
Well Name SOUTH RED LAKE II UNI Well Type Oil (Producing) UL ST Directions Purpose Normal Routine Activity Type Routine/Periodic Notification Type Date Performed 5/28/2014	IT TR E-36=17S-27E maliance Issues ilation Found?	Number 2 013 / Status Expired TA Current Type: O Status	Inspect No. (i	TWG1414838032 NA
Purpose Normal Routine Activity Type Routine/Periodic Notification Type Date Performed 5/28/2014	ilation Found?			Type: Status
Normal Routine Activity Type Routine/Periodic Notification Type Date Performed 5/28/2014	ilation Found?			Type Status
Notification Type Date Performed 5/28/2014 Mell Che Insp			ge ONGARD to	240974
Date Renormed 5/28/2014	eck Global Comp	Well P&A'd. Marker in p Electric pole on location Note: not ready to releas S fastline flowline still on	ı. se 1 JT tbg an	
Date Extension	illediitems > > >			
Comply# Inci	ident No Generate	Inspector Tir	m Gum j/ [INSP],	Duration Duration
API Well No. 30-015-00658-00-00	Owner LEGACY R	ESERVES OPERATING, LP	County	Eddy
Well Name SOUTH RED LAKE II UNI Well Type (Oil (Producing) - UL ST	σ.	Number 013		IREI1207433976 NA
Purpose Con	noliance Issues	Current Type: O Status		Type Status
Type Signature Test	olation Found? ☐ gniticant N©? ☐			240974
Notification Tỳpe; Wall	edkélokal Com	OK. All Equipment and I	Location in Go	ood Shape.
Date Extension	p/MIT Incident illed Items > > Vrite Compliance			
Comply # Inpr	ident No Generate	Inspector Rich	nard Inge. /[INSP].	Duration