Submit One Copy To Appropriate District	State of New Me	xico	Form C-103		
Office District I District I District I District I District I District I District II District II District II			Revised November 3, 2011		
1625 N. French Dr., Hobbs, NM 88278SIA DISTRICT District II			WELL API NO.		
District II 811 S. First St., Artesia, NM 8821 MAY 2 4 2007IL CONSERVATION DIVISION District III			30-005-63093 5. Indicate Type of Lease		
District III 1220 South St. Francis Dr. 1220 South St. Francis Dr.			STATE [
District IV	Santa Fe, NM 87	505	6. State Oil & Ga		
District IV 1220 S. St. Francis Dr., Santa Fe, NM ECEIVED 87505					
87505 SUNDRY NOTICES AND	REPORTS ON WELLS		7. Lease Name or	Unit Agreeme	ent Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			TRUE GRIT FEI	_	one ivaline
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				-	
1. Type of Well: Soil Well Gas Well Other			8. Well Number	1	
2. Name of Operator			9. OGRID Number		
LEGACY RESERVES OPERATING LP			240974		
3. Address of Operator			10. Pool name or Wildcat		
PO BOX 10848, MIDLAND, TX 79702			CHISUM DEVONIAN, NORTHEAST		
4. Well Location					
Unit Letter <u>L</u> : <u>1265</u> feet from th	e NORTH line and <u>1215</u>	feet from the WEST	ine		
Section <u>03</u> Township <u>11S</u> Rang					
11. Elev	vation (Show whether DR,	RKB, RT, GR, etc.)			
3752' GL					
12. Check Appropriate Box to Indicate	e Nature of Notice, Ro	eport or Other Da	ta		Ì
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRI			_		
	LE COMPL	CASING/CEMENT			
OTHER: \(\) \(\) \(\) Location is ready for OCD inspection after P&A					
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.					
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the					
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR					
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.					
TERMINENTER STAME BE ON	THE MINISTER S SOR	Neu.			
	possible to original grou	nd contour and has be	een cleared of all j	unk, trash, flo	w 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 OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed					
from lease and well location.					
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have					
to be removed.)					
All other environmental concerns have been addressed as per OCD rules.					
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-					
retrieved flow lines and pipelines.	r wall on looser all alcotmi	al comitoe moles and	linas hava haan va	mariad from la	low bee see
If this is a one-well lease or last remaining location, except for utility's distribution infrast		cai service poles and	illies have been rei	moved from fe	ase and wen
to the control of the					
When all work has been completed, return this	form to the appropriate I	District office to sche	dule an inspection.		
Ψ ()					
SIGNATURE WALLAND	TITLE (COMPLIANCE CO	<u>ORDINAT</u> OR	DATE <u>05/1</u>	9/2017
V					
TYPE OR PRINT NAME <u>LAURA PINA</u>	E-MAIL:	lpina@legacylp.	com	PHONE: <u>43</u>	<u>2-689-5273</u>
For State Use Only	0				
APPROVED BY: Jaky 1 2 Burn	TITLE	ulliance of	FICER	DATE	5/2017
Conditions of Approval (if any):		4 - 111			-,, /