

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

HOBBS OCD

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

FEB 13 2017

RECEIVED

WELL API NO. 30-005-00835
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 303735
7. Lease Name or Unit Agreement Name ROCK QUEEN UNIT
8. Well Number 15
9. OGRID Number 240974
10. Pool name or Wildcat CAPROCK; QUEEN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4426'

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

2. Name of Operator
LEGACY RESERVES OPERATING LP

3. Address of Operator
PO BOX 10848, MIDLAND, TX 79702

4. Well Location
 Unit Letter E : 1980 feet from the NORTH line and 660 feet from the WEST line
 Section 23 Township 13S Range 31E NMPM County CHAVES

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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" 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: TA extension <input checked="" 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.

We are requesting a TA extension be granted to this well. We are actively marketing the property and the well should be part of the development plans for the new company. The well is included in our current plans to expand the CO2 project when oil prices reach a higher level. We will like to keep the wellbore TA'ed until the time.

Procedure: Notify OCD. Perform MIT. Turn in paperwork

NO PRODUCTION REPORTED IN
~~36~~ MONTHS

DENIED

RETURN WELL TO PRODUCTION OR
 P/A WELL. MJB

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 John Saenz TITLE OPERATIONS ENGINEER DATE 02/09/2017

Type or print name JOHN SAENZ E-mail address: jsaenz@legacylp.com PHONE: 432-689-5200

For State Use Only

APPROVED BY: MJB TITLE DENIED DATE 2/16/2017

Conditions of Approval (if any):