Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natu	ral Resources	WELL API NO.	evised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St. Artesia, NM 8840 OIL CONSERVATION DIVISION		30-025-10390		
of the first of Autosia, two ogses		5. Indicate Type of Leas		
District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 7 2012 District IV - (505) 476-3460 NO Santa Fe, NM 87505		STATE 6. State Oil & Gas Leas	FEE 🛛	
1220 S St. Francis Dr., Santa Fe, NM 87505	-n/FD		LC-058626-A	C 140.
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)			7. Lease Name or Unit Agreement Name LANGLIE MATTIX PENROSE SAND UNIT	
1. Type of Well: Oil Well Gas Well Other INJECTION			8. Well Number 73	
2. Name of Operator LEGACY RESERVES OPERATING LP			9. OGRID Number 240974	8
3. Address of Operator P.O. BOX 10848		10. Pool name or Wildo		
	AND, TX 79702		LANGLIE MATTIX; 7 RV	/RS-Q-GRAYBURG
4. Well Location Unit Letter B	: 660 feet from the NORTH	line and	980 feet from the	EAST line
Section 21	Township 22S	Range 37E		County LEA
	11. Elevation (Show whether DR,			
**************************************	3347' GR		Mari Hill	Frankle View
12. Check A	Appropriate Box to Indicate No	ature of Notice,	Report or Other Data	
NOTICE OF IN	TENTION TO:	SHR	SEQUENT REPOR	T ∩F·
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐				
TEMPORARILY ABANDON			 -	DA 🗍
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	T JOB	
DOWNHOLE COMMINGLE □				
OTHER: HIT/HIC		OTHER:		
	leted operations. (Clearly state all p			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
proposed completion of rec	mpletion.			
44/9/49 194 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
11/2/12 We developed a HIT, which resulted in a HIC. We intend to rig up asap, pooh w/ Tbg. & Packer, rih w/ 7" RBP to shut the water flow off. We will then evaluate whether to Repair & Return to Injection				
or submit to P/A.				
			-	
Spud Date:	Rig Release Da	te:		
I hereby certify that the information	shove is true and complete to the be	est of my knowledge	e and helief	
A a	I	st of my knowledge	e and benef.	
SIGNATURE Dly	MANUE TITLE OPER	ATIONS SUPERIN	JTENDENT DATE 1	1/05/2012
17/				
Type or print name BERRY/JOAN For State Use Only	E-mail address	3:	PHONE:	432-689-5200
APPROVED BY: DATE 1-8-2012				
Conditions of Approval. The Operator shall give the OCD				
District office 24 hours notice before work begins. CONDITION OF APPROVAL: Notify OCD Hobbs Office 24 hours prior to running MIT Test & Chart.				
	; -	- Onice 24 hours	prior to running MIT Te	est & Chart
				NOV 0 8 2012