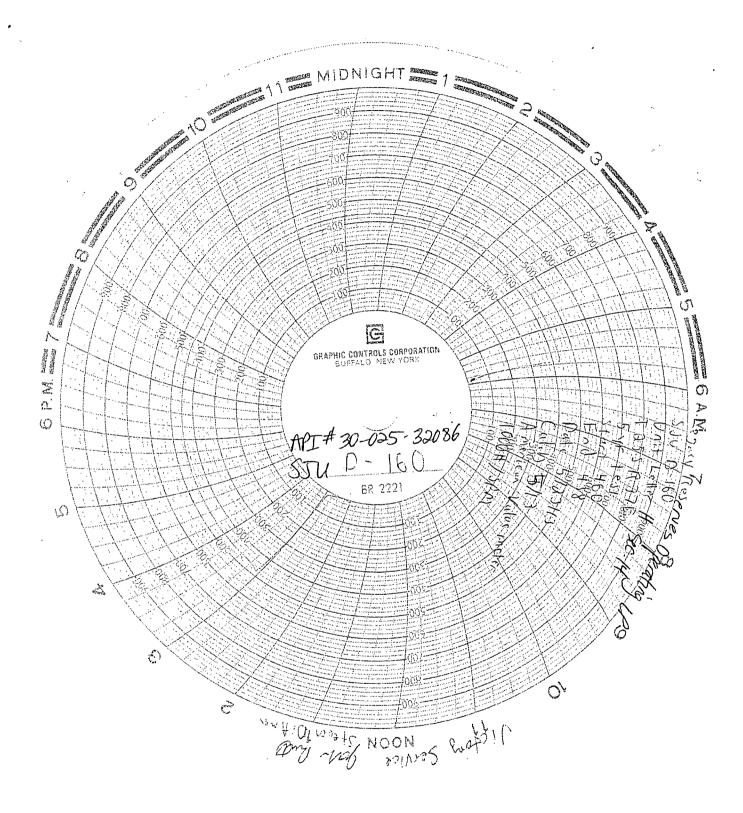
Submit 1 Copy To Appropriate DAGBBS OCD State of New Mexico	Form C-103		
Office District 1 – (575) 393-6161 Energy, Minerals and Natural Resources	Revised August 1, 2011		
1625 N. French Dr., Hobbs, NM 88240 9 5 2013	WELL API NO.		
District II - (575) 748-1283 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210	30-025-32086 5. Indicate Type of Lease		
District III - (505) 334-6178 1220 South St. Francis Dr.	STATE FEE FEE		
1000 Rio Brazos Rd., Aztec, NM 87 SECEIVED District IV – (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(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	SOUTH JUSTIS UNIT		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTION	8. Well Number D-160		
2. Name of Operator	9. OGRID Number		
LEGACY RESERVES OPERATING LP	240974		
3. Address of Operator P.O. BOX 10848 MIDLAND, TX 79702	10. Pool name or Wildcat JUSTIS; BLINEBRY-TUBB-DRINKARD		
4. Well Location			
	1100 feet from the <u>EAST</u> line		
Section 14 Township 25S Range 37E	NMPM County LEA		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3110' GR			
3110 OK			
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data		
NOTICE OF INTENTION TO: SUB:	SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			
TEMPORARILY ABANDON	LLING OPNS. P AND A		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	JOB		
DOWNHOLE COMMINGLE			
OTHER: 5 YEAR	MIT TEST		
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 Cor	npletions: Attach wellbore diagram of		
proposed completion or recompletion.			
05/23/13 – 5 YEAR MIT. PRESSURE CASING TO 460#, HELD FOR 30 MINS. CHA	RT ATTACHED.		
Spud Date: Rig Release Date:			
<u> </u>	***************************************		
I hereby certify that the information above is true and complete to the best of my knowledge			
Thereby certify that the information above is true and complete to the best of my knowledge	e and belief.		
SIGNATURE COM TITLE REGULATORY TEC	H DATE <u>06/252013</u>		
Type or print name I ALID A DINIA E	DHONE: 422 622 6222		
Type or print name LAURA PINA E-mail address:	PHONE: 432-689-5200		
APPROVED BY TITLE TITLE TITLE	DAGO-25-2013		
Conditions of Approval (if any):			
	1		

JUN 27 2013



<u>District 1</u> 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 JUN 2 5 2013

RECEIVED

API Number 32086

300

State of New Mexico Energy, Minerals and Natural Resources Department

Operator Name

Rejerves

Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

<u> </u>	U	<u> </u>			<u>D-160</u>	
		7. Surface Local	tion		`	
UL-Lot Section To	ownship Range 255 37E	Feet from 1700	N/S Line		V Line County	
·		Well Statu	s	•		
Well Status	SHUT-IN	PRODUCING DATE SIV IN 5/83/13				
OPEN B	RADENHEAD AND INT	ERMEDIATE TO ATMOSPH			СН	
If bradenhead flowed water.	check all of the description	OBSERVED De	ATA			
	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Csng	(E)Tubing	
Pressure	Q			<u>`&</u>	900	
Flow Characteristics			<u> </u>			
Puff	Y/N	Y/N	Y/N	<u> </u>		
Steady Flow	Y / N,	Y/N	Y/N	X \ \(\int \)		
Surges	Y / (N)	Y/N	Y/N	\$\sqrt{2}	Í	
Down to nothing	Y/N	Y/N	Y/N	(<u>x</u>) / N		
Gas or Oil	Y/N)	Y/N	Y/N	7 \ \(\text{Y} \)		
Water	Y/(N)	Y / N	Y/N	170		
If bradenhead flowed water,	check all of the description	ons that apply:				
CLEAR	FRESH	SALTY	SULFUR	1	LACK	
D 943						
				/		
			Ę	<u>~/pep</u>	6-25-201	
Signature:	O ithmu		<i>–</i>	-yacız	6-25-20(ATION DIVISION	
Signature: Acres Printed name: 3+ 4v			Enti	-yacız		
Merco			Enti Re-	OIL CONSERV		
Printed name: 5+ 2v				OIL CONSERV		
Printed name: St Rv Title: E-mail Address:				OIL CONSERV		
Printed name:	en Nillman			OIL CONSERV		