

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

Form C-103
Revised August 1, 2011

| |
|---|
| WELL API NO. 30-025-10408 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Langlie Mattix Penrose Sand Unit |
| 8. Well Number 43 |
| 9. OGRID Number 240974 |
| 10. Pool name or Wildcat LANGLIE MATTIX; 7 RVRS-Q-GRYBG |

| | |
|--|--|
| 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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION | |
| 2. Name of Operator LEGACY RESERVES OPERATING LP | |
| 3. Address of Operator P.O. BOX 10848 MIDLAND, TX 79702 | |
| 4. Well Location Unit Letter <u>F</u> : <u>1980</u> feet from the <u>NORTH</u> line and <u>1980</u> feet from the <u>WEST</u> line Section <u>22</u> Township <u>22S</u> Range <u>37E</u> NMPM County <u>LEA</u> | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3364' GR | |

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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> |
| | OTHER: 5 YEAR MIT TEST <input checked="" 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.

05/15/13 - 5 YEAR MIT. PRESSURE CASING TO 440#, HELD FOR 30 MINS. CHART ATTACHED.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

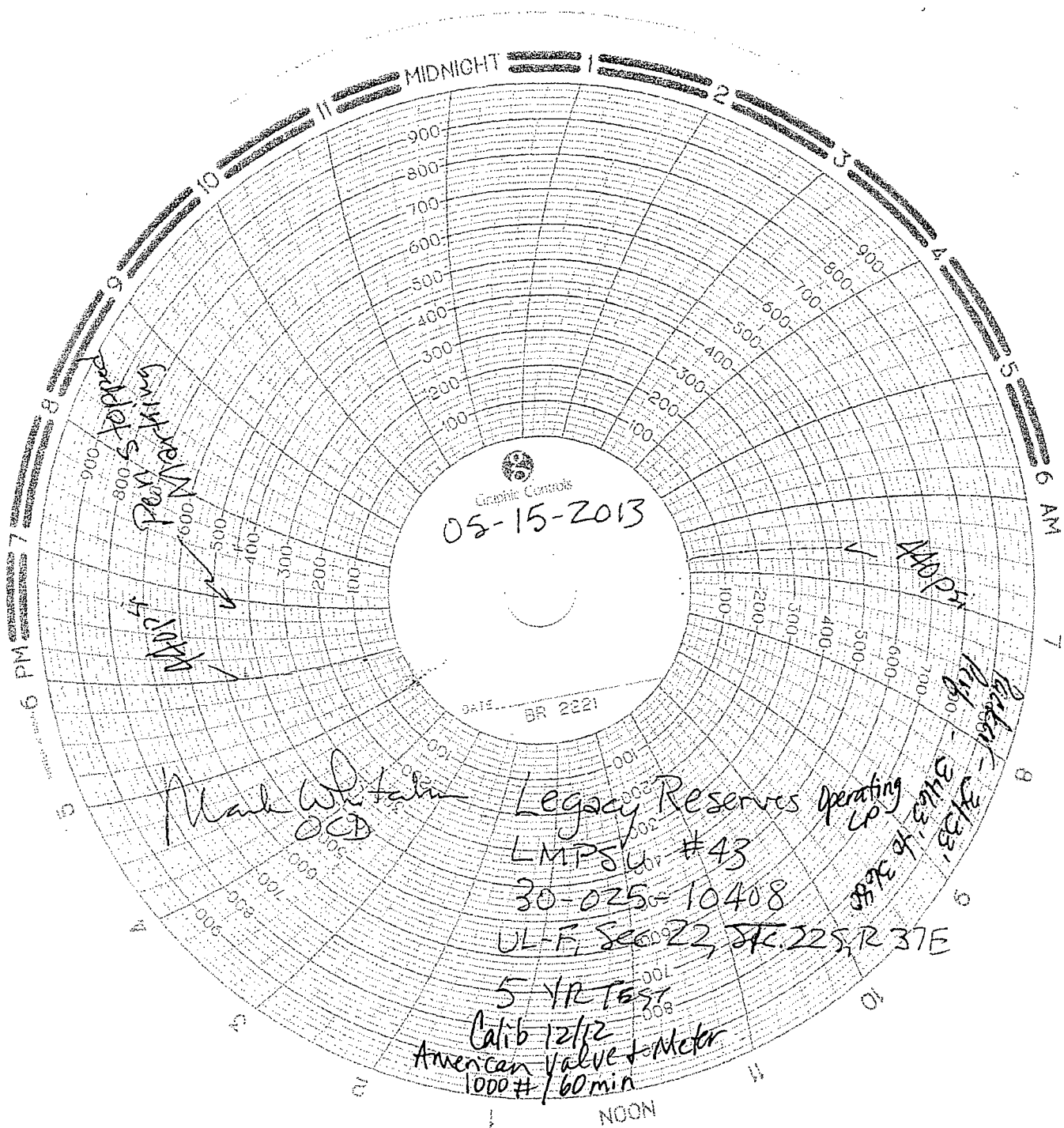
SIGNATURE Laura Pina TITLE REGULATORY TECH DATE 06/27/2013

Type or print name LAURA PINA E-mail address: _____ PHONE: 432-689-5200

For State Use Only

APPROVED BY: Mary G. Brown TITLE Compliance Officer DATE 6/28/2013
Conditions of Approval (if any):

JUL 08 2013



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District 1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

HOBBS OCD

JUN 27 2013

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

RECEIVED

BRADENHEAD TEST REPORT

| | |
|--|-----------------------------------|
| Operator Name <i>Legacy Reserves Operating LP</i> | API Number <i>30-025-10408</i> |
| Property Name <i>LMP,SL</i> | Well No. <i>43</i> |

2. Surface Location

| | | | | | | | | |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|
| UL - Lot <i>F</i> | Section <i>22</i> | Township <i>22S</i> | Range <i>37E</i> | Feet from <i>1980</i> | N/S Line <i>N</i> | Feet From <i>1980</i> | E/W Line <i>W</i> | County <i>Lea</i> |
|----------------------|----------------------|------------------------|---------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|

Well Status

| | | | |
|-------------------------|---------|---------------------------|------------------------|
| Well Status <i>A</i> | SHUT-IN | PRODUCING <i>SW IN</i> | DATE <i>5/15/13</i> |
|-------------------------|---------|---------------------------|------------------------|

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

| | (A) Surf-Interm | (B) Interm (1)-Interm (2) | (C) Interm-Prod | (D) Prod Casing | (E) Tubing |
|----------------------|-----------------|---------------------------|-----------------|-----------------|-------------|
| Pressure | <i>X</i> | | | <i>X</i> | <i>1700</i> |
| Flow Characteristics | | | | | |
| Puff | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |
| Steady Flow | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |
| Surges | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |
| Down to nothing | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |
| Gas or Oil | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |
| Water | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | <i>Y/N</i> | |

If bradenhead flowed water, check all of the descriptions that apply:

| | | | | |
|-------|-------|-------|--------|-------|
| CLEAR | FRESH | SALTY | SULFUR | BLACK |
|-------|-------|-------|--------|-------|

Remarks: *(0) Gas*

| | |
|------------------------------------|---------------------------|
| Signature: <i>Steve Dittus</i> | OIL CONSERVATION DIVISION |
| Printed name: <i>Steven Dittus</i> | Entered into RBDMS |
| Title: | Re-test |
| E-mail Address: | |
| Date: <i>5/15/13</i> | Phone: |
| Witness: | <i>M. Brown 6/28/2013</i> |