Submit 1 Copy To Appropria	~	State of New Me			Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 District III – (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				Revised July,18, 2013 WELL API NO.	
				5. Indicate Type of	-025-11469
				STATE [FEE
				6. State Oil & Ga	s Lease No. 12452
SUNDRY NORICES 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				7. Lease Name or Unit Agreement Name LANGLIE JAL UNIT	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTOR /				8. Well Number	53
Name of Operator LEGACY RESERVES OPERATING LP				9. OGRID Numb	er 40974
3. Address of Operator				10. Pool name or	Wildcat
P.O. BOX 10848, MIDLAND, TX 79702				LANGLIE MA	ATTIX; 7R-Q-G
4. Well Location Unit Letter <u>L</u> : 2080 feet from the <u>SOUTH</u> line and <u>660</u> feet from the <u>WEST</u> /line					
Section 6 Township 25S Range 37E NMPM LEA County					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
GL 3213'					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK					ALTERING CASING
TEMPORARILY ABANDON					
DOWNHOLE COMMINGLE					
CLOSED-LOOP SYSTEM OTHER: RUN MIT TO EXTEND TA STATUS OF WELL OTHER:					
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.					
proposed completion of recompletion.					
Legacy Reserves Operating LP recently purchased the Langlie Jal Unit and took over as operator on June 3, 2013. Legacy					
is currently in the process of evaluating this well for reactivation potential.					
Legacy Reserves respectfully requests permission to extend the TA status of this well for a period of 2 years.					
Condition of Approval: notify					
OCD Hobbs office 24 hours					
prior of running MIT Test & Chart					
Spud Date:		Rig Release D	ate:		
Spud Date.		Rig Release D	atc.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
Thereby covery and the information according to the complete to the cover of my fine models and context.					
SIGNATURE //	My	TITLE <u>RI</u>	EGULATORY TEC	<u>H</u> DAT	E 11/14/13
Type or print name MELANIE REYES E-mail address: MREYES@LEGACYLP.COM PHONE: (432) 689-5200					
Approved by Maria					
Conditions of Approval (if any)					
	7			INU	v apr. ✓