

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) 476-3450  
 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

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

RECEIVED  
 JUN 17 2014  
 HOBBS OCD

WELL API NO. 30-025-34154
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name HOOD STATE
8. Well Number 1
9. OGRID Number 240974
10. Pool name or Wildcat CAM; DEVONIAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3918' GL; 3936' KB

**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 F : 2250 feet from the NORTH line and 2310 feet from the WEST line  
 Section 25 Township 10S Range 37E NMPM County LEA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 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: <input type="checkbox"/>		OTHER: MIT <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.

Misplaced MIT chart, found and now resubmitting.

04/28/14 Ran MIT pressure casing to 505#, for 34 minutes. OCD notified but did not witness. Chart attached

520# - 515#

This Approval of Temporary Abandonment Expires 4/28/2016

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 06/09/2014

Type or print name LAURA PINA E-mail address: lpina@legacylp.com PHONE: 432-689-5200

For State Use Only

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 6/16/2014  
 Conditions of Approval (if any):

JUN 17 2014

Handwritten initials/signature

START

96 MIN

90 MIN 8

90 MIN 91

24 MIN

32 MIN

40 MIN 70

48 MIN

56 MIN

64 MIN

72 MIN

88 MIN

80 MIN

Graphic Controls LLC  
(6.375 ARC LINE GRAD.)

34 minute Test  
DATE 04/28/2014  
MCI P 0-1000-8-96MIN

Ernest Benitez  
Legacy Reserves Operating LP  
Hood State #1

2250' FNL + 2310' FNL  
Unit # F, Sec. 25-T105-R37E

API# 30-025-34154

G. Cruz (Adam Cruz)

Basic # 28535  
4-28-14

Basic meter - 3912.8  
1000# / 9 1/2 min  
Cal'd 4/28/14

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1/8" IN. GEARS

# D.C. Meter Service

PO Box 869 Plains Hwy.

Denver City, TX 79323

806-592-2106

806-592-2107 fax

To: Basic Energy Date: 4/28/14

This is to certify that:

I Arturo Del Real, meter technician for D.C. Meter

Service, have checked the calibration on the following instrument:

1000# Bimen chart recorder

Serial Number: 39128 at the following points:

0 - 25% 250# ✓

0 - 50% 500# ✓

0 - 75% 750# ✓

0 - 100% 1000# ✓

Signed: Arturo Del Real

Remarks: