

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

Form C-103
 Revised July 18, 2013

HOBBS OCS
AUG 17 2015
RECEIVED

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-025-11761
2. Name of Operator LEGACY RESERVES OPERATING LP		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator PO BOX 10848, MIDLAND, TX 79702		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>D</u> : <u>660</u> feet from the <u>NORTH</u> line and <u>990</u> feet from the <u>WEST</u> line Section <u>25</u> Township <u>25S</u> Range <u>37E</u> NMPM County <u>LEA</u>		7. Lease Name or Unit Agreement Name SOUTH JUSTIS UNIT <input checked="" type="checkbox"/>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3066' GR		8. Well Number <u>23</u>
		9. OGRID Number 240974
		10. Pool name or Wildcat JUSTIS; BLINEBRY-TUBB-DRINKARD

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

E-PERMITTING <input type="checkbox"/> <SWD <input type="checkbox"/> INJECTION <input type="checkbox"/> CONVERSION <input type="checkbox"/> RBDMS <input checked="" type="checkbox"/> MW <input type="checkbox"/> RETURN TO <input type="checkbox"/> TA <input checked="" type="checkbox"/> <input type="checkbox"/> CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> INT TO PA <input type="checkbox"/> P&A NR <input type="checkbox"/> P&A R <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	OTHER: MIT for TA <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.

07/30/15 Ran MIT, pressure casing to 580#, held for 30 minutes. Witnessed by Bill Sonnamaker-OCD; chart attached.

This Approval of Temporary Abandonment Expires 7/30/2016 /

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 08/13/2015

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 8/19/2015
 Conditions of Approval (if any):

AUG 20 2015

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