

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

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-025-36221
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 DIAMOND
8. Well Number 3
9. OGRID Number 240974
10. Pool name or Wildcat NADINE;SAN ANDRES, DRKD, ABO

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 D : 990 feet from the NORTH line and 760 feet from the WEST line
 Section 24 Township 19S Range 38E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3599' GL

HOBBBS.OCD
 OCT 05 2015
 RECEIVED

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

E-PERMITTING <SWD INJECTION> P CONVERSION <input type="checkbox"/> RBDMS <input type="checkbox"/> T RETURN TO <input type="checkbox"/> TA <input type="checkbox"/> P CSNG <input type="checkbox"/> ENVIRO <input type="checkbox"/> CHG LOC <input type="checkbox"/> C INT TO PA <input type="checkbox"/> P&A <input checked="" type="checkbox"/> P&A R <input type="checkbox"/> OTHER: <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 checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

09/23/15 MIRU plugging equipment.
 09/24/15 RU wellhead, NU BOP. Tagged PBDT @ 4008'. Circulated well w/ 80 bbls mud laden fluid @ 3987'. Pressure tested 5 1/2 csg, held 500 psi. Spotted 25 sx class C cmt @ 2900-2650'. POH w/ tbg.
 09/25/15 Spotted 30 sx class C cement from 1820-1570'. POH w/ tbg, WOC. Tagged plug @ 1521'. POH w/ tbg. Pressure tested csg, held 800 psi. Perf'd csg @ 100'. Tried to established injection rate, pressure up on csg to 1300 psi. Spotted 25 sx class C cmt @ 250' to surface.
 09/28/15 Rigged down and moved off.
 09/30/15 Moved in backhoe and welder, dug out cellar, and cut off wellhead. Welded "Below ground Dry Hole Marker". Backfilled cellar, removed deadman. Cleaned location and moved off.
 Installed Closed-Loop System with steel tanks. Hauled contents from Closed-Loop System to approved NMOCD disposal location according to Rule 19.15.17.

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 COMPLIANCE COORDINATOR DATE 10/01/2015

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

APPROVED BY: Mahy Brown TITLE Dist Supervisor DATE 10/5/2015
 Conditions of Approval (if any)

OCT 07 2015

jm