

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. 30-025-09644
5. Indicate Type of Lease: STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 306443
7. Lease Name or Unit Agreement Name COOPER JAL UNIT
8. Well Number 134
9. OGRID Number 240974
10. Pool name or Wildcat Jalmat; T-Y-7R; Langlie Mattix; 7R-Q-G

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 INJECTOR

2. Name of Operator
LEGACY RESERVES OPERATING LP

3. Address of Operator
PO BOX 10848, MIDLAND, TX 79702

4. Well Location
 Unit Letter N : 330 feet from the SOUTH line and 1650 feet from the WEST line
 Section 24 Township 24S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3310' GL

HOBBS OGD
 SEP 30 2015
 RECEIVED

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

E-PERMITTING <SWD INJECTION> CONVERSION _____ RBDMS _____ RETURN TO _____ TA _____ CSNG _____ ENVIRO _____ CHG LOC _____ INT TO PA _____ P&A NFP _____ P&A R _____ CLOSED-LOOP SYSTEM <input checked="" 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.

09/16/15 MIRU plugging equipment.
 09/17/15 ND wellhead, NU BOP. POH w/ 90 jts tbg and packer. RIH and set CIBP @ 3396', displaced to 3149'. RIH and set 2nd CIBP @ 2991.
 09/18/15 Circulated hole with MLF. Pressure tested csg, held 500 psi. Spot 25 sx cmt @2991, displaced to 2744. WOC. Tagged plug @ 1007'. POH w/ tbg. RIH w/ packer. Perf'd csg @ 340'. Squeezed 40 sx cmt @ 340-230' @ 550 psi. WOC.
 09/21/15 POH w/ Packer. RIH w/ tbg, tagged plug @ 201. POH w/ tbg. Perf'd csg @ 100'. RIH w/ packer, pressured up 700 psi. RIH w/ tbg. Spot 20 sx cmt @ 201' to surface. ND BOP, top off well w/ cmt. Rigged down, moved off.
 09/23/15 Download backhoe. Dug out cellar. Cut off well head. Welded on Above Ground Dry Hole Marker. Dug up deadmen. 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 REGULATORY TECH DATE 09/28/2015

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

For State Use Only
 APPROVED BY: Marys Brown TITLE Dist. Supervisor DATE 10/1/2015
 Conditions of Approval (if any)

OCT 07 2015