

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. 30-025-22726
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 SNAKE EYES STATE
8. Well Number 1
9. OGRID Number 240974
10. Pool name or Wildcat SAND SPRINGS; ABO
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4151' GL

**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 I : 946 feet from the NORTH line and 660 feet from the EAST line  
 Section 6 Township 11S Range 35E NMPM County LEA

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

<b>NOTICE OF INTENT TO PERFORM REMEDIAL WORK</b> <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> DOWNHOLE COMMINGLE <input checked="" type="checkbox"/> CLOSED-LOOP SYSTEM OTHER: <input type="checkbox"/>	<b>INT TO PA</b> <input checked="" type="checkbox"/> P&A NR <input checked="" type="checkbox"/> P&A R	<b>SUBSEQUENT REPORT OF:</b> <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING/CEMENT JOB OTHER: <input type="checkbox"/>	<input type="checkbox"/> ALTERING CASING <input checked="" type="checkbox"/> P AND A
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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.

- 02/01/16 MIRU plugging equipment.
- 02/02/16 Dug out cellar.
- 02/03/16 ND well head, NU BOP.
- 02/04/16 Set 5 1/2 CIBP @ 9040'. Pressure tested csg, held 500 psi. Spot'd 25 sx class H cmt @ 9040-8787'.
- 02/05/16 Spot'd 25 sx class C cmt @ 6950-6697' (per Mark Whitaker with NM OCD). Perf'd csg @ 5595'. Sqz'd 50 sx class C cmt & displaced to 5450'. WOC. Tag'd plug @ 5420'. Perf'd csg @ 4250'. Sqz'd 50 sx class C cmt & displaced to 4100'.
- 02/08/16 Re-sqz'd 50 sx class C cmt @ 4250 & displaced to 4100'. WOC. Tag'd plug @ 4070'. Perf'd csg @ 2300'. Sqz'd 50 sx class C cmt & displaced to 2150'. WOC. Tag'd plug @ 2110' (notified Mark Whitaker w/ NM OCD).
- 02/09/16 Perf'd csg @ 450'. ND BOP, NU wellhead. Sqz'd 300 sx class C cmt & circulated to surface (notified Mark Whitaker w/ NM OCD). Rigged down, cleaned location, moved off.
- 02/11/16 Moved in backhoe and welder. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Removed 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 Kent Williams TITLE SENIOR ENGINEER DATE 02/18/2015  
 Type or print name KENT WILLIAMS E-mail address: kwilliams@legacylp.com PHONE: 432-689-5200  
**For State Use Only**  
 APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 03-02-2016  
 Conditions of Approval (if any): MAR 03 2016