

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. 30-005-01100	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name WEST CAP QUEEN SAND UNIT	<input checked="" type="checkbox"/>
8. Well Number 10	<input checked="" type="checkbox"/>
9. OGRID Number 240974	<input checked="" type="checkbox"/>
10. Pool name or Wildcat CAPROCK; QUEEN	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4118' 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 O : 660 feet from the SOUTH line and 1980 feet from the EAST line
 Section 17 Township 14S Range 31E NMPM County CHAVES

HOBBS OCD
MAR 23 2016
RECEIVED

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

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

- 03/01/16 MIRU Plugging equipment, dug out cellar, ND wellhead, NU BOP.
- 03/02/16 Set CIBP to 2750', circulated hole with 64 bbls of mud laden fluid. Spotted 25 sx class C cmt @ 2750-2503'. WOC. (per Mark Whitaker with OCD).
- 03/03/16 Tagged plug @ 2476'. Spotted 25 sx cmt @ 1974 & displaced to 1733'. WOC. Tagged plug @ 1732'. Perf'd 5 1/2 csg @ 1080'. Pressured up on csg. Spotted 50 sx cmt @ 1128 & displaced to 648' (per Mark Whitaker with OCD).
- 03/04/16 Tagged plug @ 720'. Perf'd 5 1/2 csg @ 265'. ND wellhead. Sqz'd 90 sx cmt @ 265' and circulated to surface. Rigged down, cleaned location, and moved off.
- 03/08/16 Moved in welder and backhoe. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Removed deadmen and moved off. Installed Closed-Loop System 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 03/18/2016
 Type or print name LAURA PINA E-mail address: lpina@legacylp.com PHONE: 432-689-5200

For State Use Only
 APPROVED BY: Mark Whitaker TITLE Petroleum Engr. Specialist DATE 03/24/2016
 Conditions of Approval (if any):

MAR 25 2016