

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. 30-025-34154	
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 HOOD STATE	
8. Well Number 1	
9. OGRID Number 240974	
10. Pool name or Wildcat CAM; DEVONIAN	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3918' GL; 3936' KB	

**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 F : 2250 feet from the NORTH line and 2310 feet from the WEST line  
 Section 25 Township 10S Range 37E NMPM County LEA

**HOBBS OCD**  
**APR 11 2016**  
**RECEIVED**

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

<b>E-PERMITTING &lt;SWD INJECTION&gt;</b>		<b>SUBSEQUENT REPORT OF:</b>	
CONVERSION <input type="checkbox"/>	RBDMS <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
RETURN TO <input type="checkbox"/>	TA <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CSNG <input type="checkbox"/>	ENVIRO <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
INT TO PA <input type="checkbox"/>	P&A NR <input type="checkbox"/>		
OTHER: <input type="checkbox"/>		OTHER: MIT for TA extension <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.

03/30/16 Ran MIT, pressure casing to 560#, held ok. Witnessed by George bower-OCD, chart attached. Well is now TA'd.

This Approval of Temporary Abandonment Expires 3/30/2018

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 04/05/2016

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

**For State Use Only**  
 APPROVED BY: Maury Brown TITLE Dist Supervisor DATE 4/13/2016  
 Conditions of Approval (if any):

APR 14 2016

MIDNIGHT

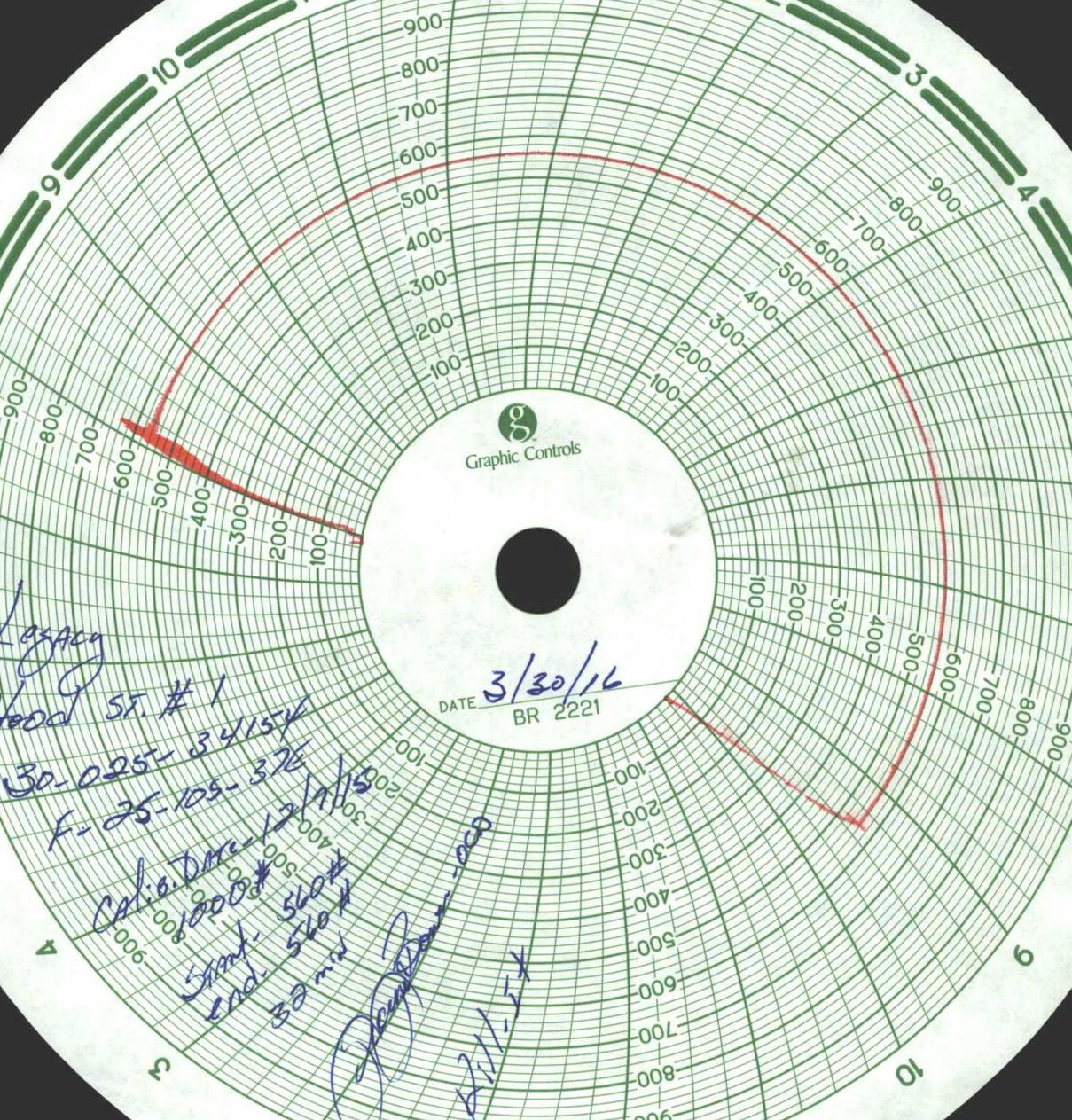
Graphic Controls

DATE 3/30/16  
BR 2221

Legacy  
Hood ST. #1  
30-025-34154  
F-25-105-32E

Calc. Date 12/1/15  
1000#  
Start 560k  
End 510k  
30 min

*[Signature]*  
12/1/15



PRINTED IN U.S.A.

6 PM

6 AM

NOON