

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 August 1, 2011

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

WELL API NO. 30-025-10564	<input checked="" type="checkbox"/>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name SKELLY PENROSE A 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 LANGLIE MATTIX; 7 RVRS-Q-GRYBG	

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 INJECTION

2. Name of Operator
LEGACY RESERVES OPERATING LP

3. Address of Operator
P.O. BOX 10848 MIDLAND, TX 79702

4. Well Location
 Unit Letter P : 660 feet from the SOUTH line and 330 feet from the EAST line
 Section 33 Township 22S Range 37E NMPM County LEA

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

HOBBS OCD

APR 28 2016

RECEIVED

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 DOWNHOLE COMMINGLE

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB

OTHER:

OTHER: 5 YEAR MIT TEST-UIC PURPOSES

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.

04/05/16 = 5 YEAR MIT. PRESSURE CASING TO 585#, HELD FOR 30 MINS. WITNESSED BY CARL FLOWERS-NMOCD, CHART ATTACHED.

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 04/25/2016

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

For State Use Only

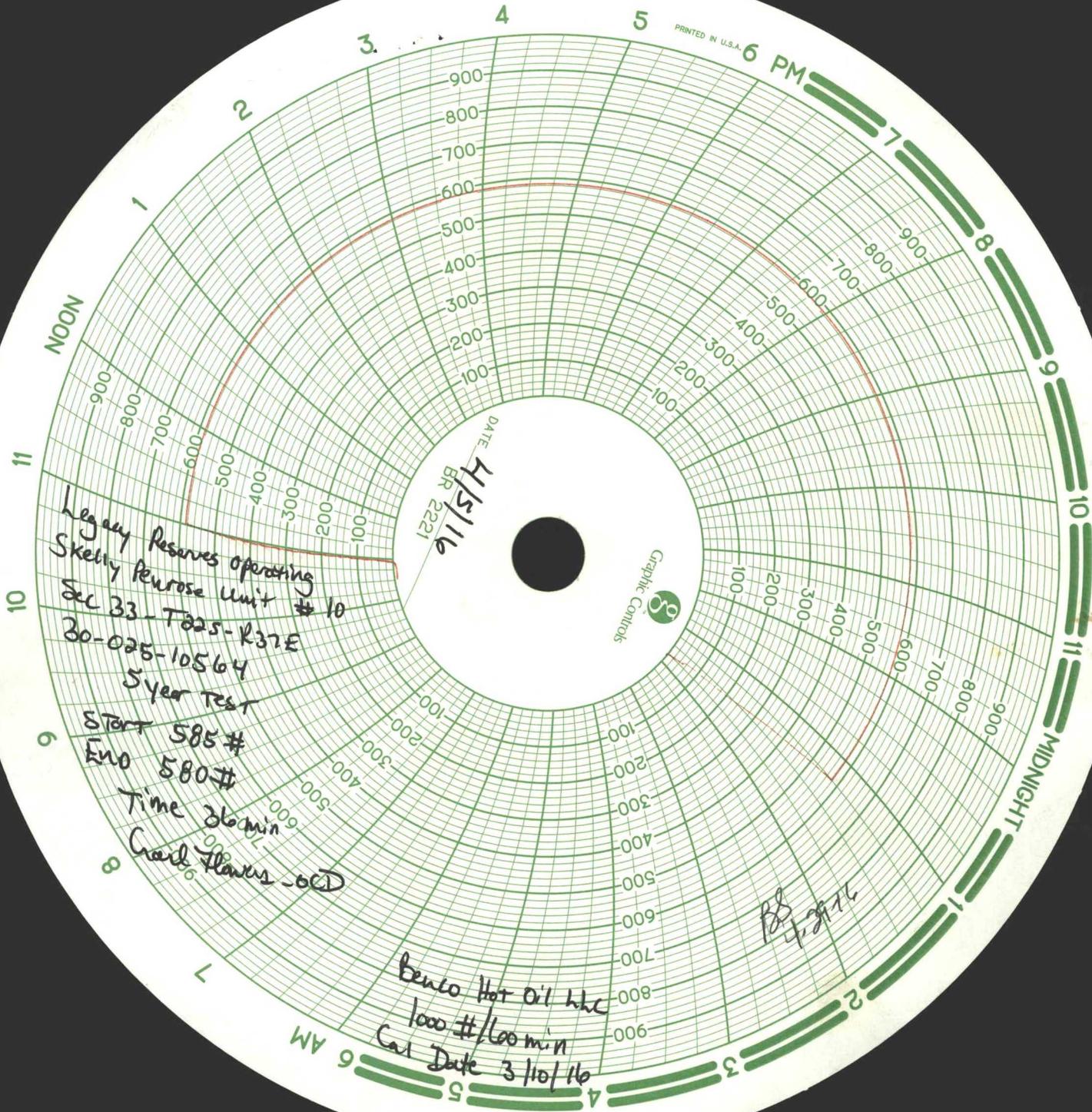
APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

APR 29 2016

[Handwritten signature]

PRINTED IN U.S.A.



DATE 4/5/16
BR 2221

Graphic Controls

Legacy Reserves operating
Skelly Penrose Unit #10
Sec 33 - T825-R37E
30-025-10564
5 year test
Start 585#
End 580#
Time 36 min
Crack Flavors - 60D

Benco Hot Oil h/c
1000 #/100 min
Cal Date 3/10/16

RS
4/29/16