

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

AUG 02 2016
 RECEIVED

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

WELL API NO. 30-025-11907	<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 SOUTH JUSTIS UNIT G	<input checked="" type="checkbox"/>
8. Well Number 27	<input checked="" type="checkbox"/>
9. OGRID Number 240974	
10. Pool name or Wildcat JUSTIS; BLINEBRY-TUBB-DRINKARD	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3044' GR	

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 B : 330 feet from the NORTH line and 1650 feet from the EAST line
 Section 36 Township 25S Range 37E NMPM County LEA

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

P T P D C OTHER:	E-PERMITTING <SWD _____ INJECTION _____> CONVERSION _____ RBDMS <u>MB</u> RETURN TO _____ TA <u>pm</u> CSNG _____ ENVIRO _____ CHG LOC _____ INT TO PA _____ P&A NR _____ P&A R _____	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: MIT for TA extension <input checked="" 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.

07/28/16 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 7/28/2018

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 07/29/2016

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

For State Use Only

APPROVED BY: Mary Brown TITLE Dist. Supervisor DATE 8/8/2016
 Conditions of Approval (if any):

MIDNIGHT

6 AM

HOBBS OCD
AUG 03 2016
RECEIVED

Graphic Controls

DATE 7/28/16
BR 2221

Start
The EX mit
Legacy

Smith-Jones #237
30-025-11907
B-36-255-37E
CAL'S DATE 3/10/16

1000A
Start-560A
End-560A
30 min

[Signature]
Banco de Plata

End

NOON

11 10 9 8 7 6 5 4 3 2 1

PM