

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 88201  
 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

**HOEBS OCD**  
**APR 05 2017**  
**RECEIVED**

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

WELL API NO. <b>30-005-29162</b>
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 <b>ROCK QUEEN UNIT</b>
8. Well Number <b>704</b>
9. OGRID Number <b>240974</b>
10. Pool name or Wildcat <b>CAPROCK-QUEEN</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4384' GL</b>

**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 **INJ**

2. Name of Operator  
**LEGACY RESERVES OPERATING LP**

3. Address of Operator  
**PO BOX 10848, MIDLAND, TX 79702**

4. Well Location  
 Unit Letter **C** : **1309** feet from the **NORTH** line and **2629** feet from the **WEST** line  
 Section **36** Township **13S** Range **31E** NMPM County **CHAVES**

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

Procedure:  
 Set CIBP at 2990' and cap with 35' cement. Contact OCD. Perform MIT test.

Reason:  
 We are requesting the well be placed in TA status for 5 years. This well is an infill injector, at this time the belief is it is not helping our recovery. We are requesting the 5 years TA status so we can have the time to evaluate the formation response to the well not injecting. Also, it will give us time to relook at the effectiveness of infills in the Rock Queen Unit.

Attached are current and proposed wellbore diagrams.

*LEAVE WELL BORE FULL OF PKR FLUID.*

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior to running MIT Test & Chart**

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 *John Saenz* TITLE OPERATIONS ENGINEER DATE 03/30/2017

Type or print name JOHN SAENZ E-mail address: jsaenz@legacylp.com PHONE: 432-689-5200

APPROVED BY: *Mailey Brown* TITLE AO/II DATE 4/5/2017

Conditions of Approval (if any): NO PROD/INJ REPORTED - 15 MONTHS

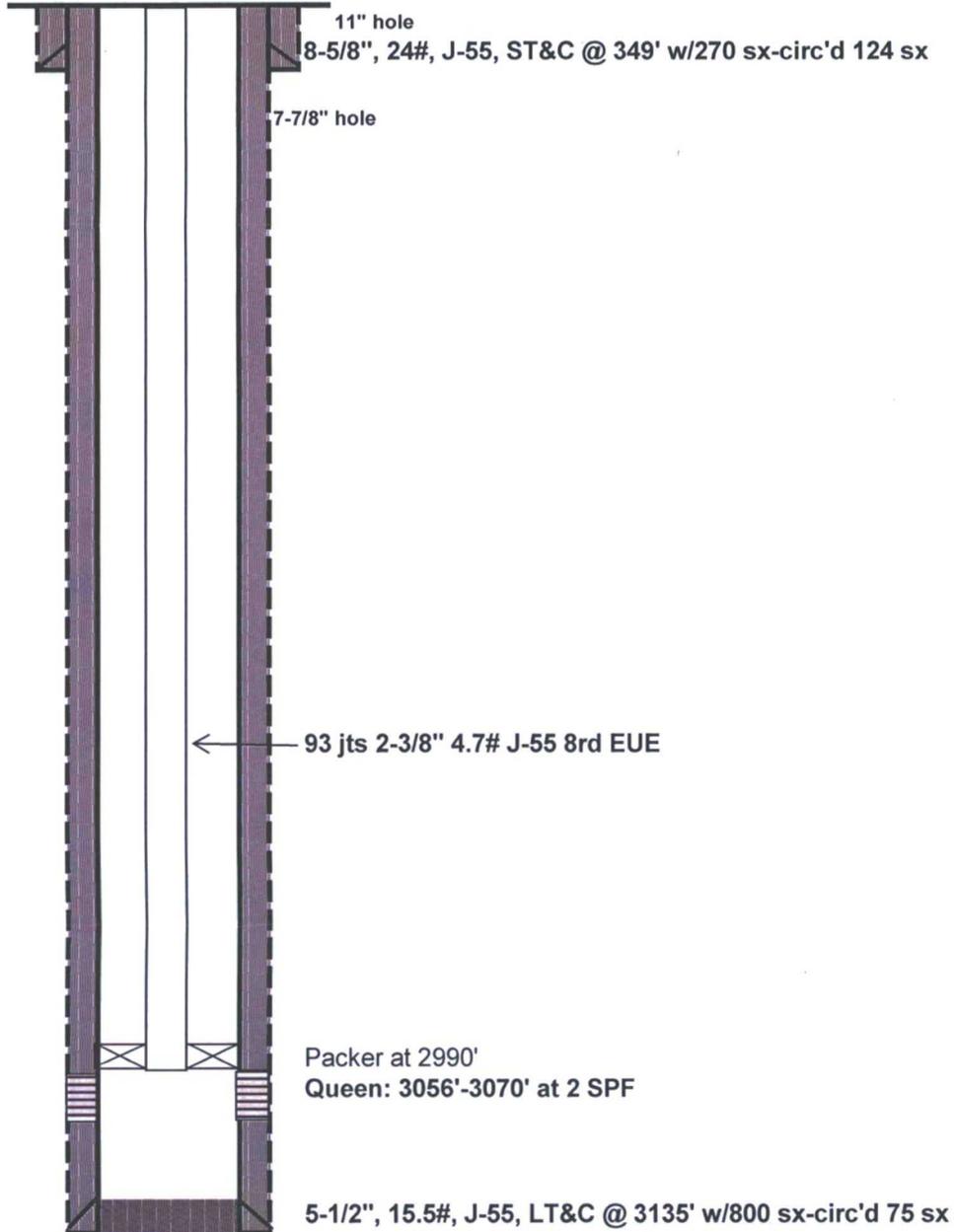
# LEGACY RESERVES LP

FIELD: Caprock  
LEASE/UNIT: Rock Queen Unit  
COUNTY: Chaves

DATE: 23-Dec-13  
BY: MWM  
WELL: 704  
STATE: New Mexico

Location: 1309' FNL & 2629' FWL, Sec 36C, T13S, R31E  
SPUD: 1/15/11 COMP: 3/31/11  
CURRENT STATUS: Active injector

KB = 13' AGL  
GL = 4384'  
API = 30-005-29162



PBTD - 3080'  
TD - 3135'

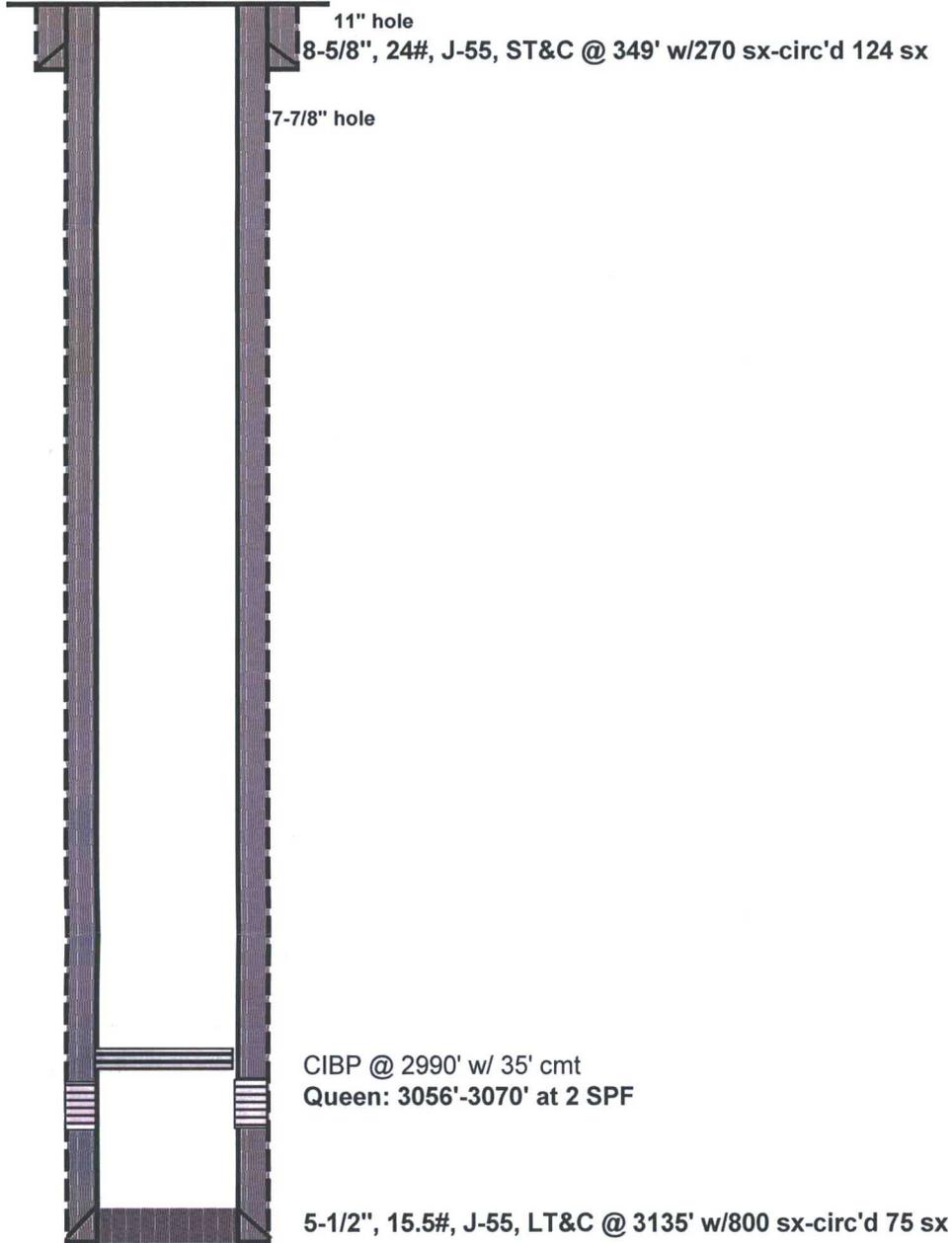
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