

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

HOBBBS OGD  
 RECEIVED  
 AUG 06 2018

<p style="text-align: center;"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p>(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.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator LEGACY RESERVES OPERATING LP</p> <p>3. Address of Operator PO BOX 10848, MIDLAND, TX 79702</p> <p>4. Well Location        Unit Letter <u>A</u> : <u>330</u> feet from the <u>NORTH</u> line and <u>990</u> feet from the <u>EAST</u> line        Section <u>4</u> Township <u>15S</u> Range <u>34E</u> NMPM County <u>LEA</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4111' GL</p>	<p>WELL API NO. 30-025-36685</p> <p>5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/></p> <p>6. State Oil &amp; Gas Lease No.</p> <p>7. Lease Name or Unit Agreement Name <u>TRES PAPALOTES 4</u></p> <p>8. Well Number <u>3</u></p> <p>9. OGRID Number 240974</p> <p>10. Pool name or Wildcat TRES PAPALOTES; UPPER PENN</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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

07/30/18 Ran MIT, pressure casing to 660#. Witnessed by George Bower-NMOCD, chart attached.

This Approval of Temporary  
 Abandonment Expires 7/30/2020

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 08/02/2018

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

APPROVED BY: Maley Brown TITLE AO/E DATE 8/7/2018

Conditions of Approval (if any):

RBDMS - CHART - ✓

