Submit One Copy To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-01202
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NN \$7505	STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa 1 c, 1105/303	6. State Oil & Gas Lease No.
87505	ورق	
SUNDRY NOTICE	S AND REPORTS WELD	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSAL	S TO DRILL OR TO EXPEN OF LUG BOX TO A	State A Bird Creek
DIFFERENT RESERVOIR, USE "APPLICAT	S AND REPORTS WELLIG BY TO A TON FOR PERMIT SORM CLOT FOR SECTION	· _
1. Type of Well: Soil Well Ga	as Well Other	8. Well Number 7
2. Name of Operator		9. OGRID Number
LEGACY RESERVES OPERATING	LP	240974
3. Address of Operator		10. Pool name or Wildcat
PO BOX 10848, MIDLAND, TX 797	02	Saunders; Permo Upper Penn
4. Well Location		
Unit Letter G: 1980 feet from the NORTH line and 2310 feet from the EAST line		
	S Range 33E NMPM County LEA 1. Elevation (Show whether DR, RKB, RT, GR,	ata)
``	4197.10' GL	eic.)
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
12. Check Appropriate Box to II.	dicate readure of notice, Report of Oth	Data Joh
NOTICE OF INTE	NTION TO: S	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐		
	<u> </u>	DRILLING OPNS. P AND A
	MULTIPLE COMPL CASING/CEN	<u> </u>
OTHER:		is ready for OCD inspection after P&A
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.		
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.		
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the		
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR		
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR		
	D ON THE MARKER'S SURFACE.	ATION HAS BEEN WELDED OR
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and		
other production equipment.		
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.		
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with		
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed		
from lease and well location.		
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have		
to be removed.)		
All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-		
retrieved flow lines and pipelines.	abandoned in accordance with 19.13.33.10 NN	TAC. All fluids have been removed from non-
* *	naining well on lease: all electrical service not	es and lines have been removed from lease and well
		County Electric Coop was contacted to remove
	on with Targa was contacted to remove the g	
older real poles on location ray olds	m with range was contested to remove the g	,
When all work has been completed, retu	urn this form to the appropriate District office to	o schedule an inspection.
$\mathcal{O}(\mathcal{V})$		•
SIGNATURE XXXIII MA	TITLE Compliance Co	DATE 05/20/2010
SIGNATURE VWW VVV	TITLE Compliance Co	ordinator DATE _05/30/2019
TYPE OR PRINT NAME LAURA P	INA F-MAII : Inina@leca	cylp.com PHONE: <u>432-689-5273</u>
101 State OSC OTHY		
APPROVED BY: Xery forte TITLE Compliance Office A DATE 6-13-19 Conditions of Approval (if any):		
Conditions of Approval (if any):		
11 \ 7/ [/	▼	•