

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 DISTRICT
HOBBS OOD
 1220 South St. Francis Dr.
 Santa Fe, NM 87502
 NOV 07 2019

WELL API NO. 30-025-37178
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Townsend
8. Well Number #1
9. OGRID Number 240974
10. Pool name or Wildcat Bronco; Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3819' GL

RECEIVED

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
P.O. Box 10848, Midland, TX 79702

4. Well Location
 Unit Letter **A** : **530** feet from the **N** line and **330** feet from the **E** line
 Section **10** Township **13S** Range **38E** NMPM County **Lea**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data *J.P.M.*

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	<i>PNR</i>
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.

09/19/19 MIRU plugging equipment. 09/27/19 RIH w/ tbg open ended, tagged existing CIBP @ 8980'. 09/28/19 Circulated hole w/ MLF. Spotted 25 sx class H cmt @ 8980-8733'. Spotted 25 sx class H cmt @ 7302-7055'. WOC. 09/30/19 Tagged plug @ 7165'. Pressure tested csg from 4700-7165, test held. 10/01/19 Isolated holes in csg @ 2280-2650'. Spotted 50 sx class C cmt @ 4700-4194'. WOC. 10/02/19 Tagged plug @ 4205'. Perf'd csg @ 2300'. Squeezed 50 sx class C cmt w/ 2% CACL @ 2300-2200'. WOC. Tagged plug @ 2160'. Perf'd csg @ 600'. Established an injection rate of 300 PSI. Squeezed 50 sx class C cmt @ 600-400'. WOC. 10/03/19 Tagged plug @ 360'. Perf'd csg @ 100'. ND BOP, NU flange. Squeezed 100 sx class C cmt @ 100' & circulated to surface on 5 1/2", 8 5/8" & 13 3/8" csg. Riggged down & moved off. 10/07/19 Moved in backhoe and welder, dug out cellar, cut off well head, and Kerry Fortner w/ OCD verified cement to surface. Welded on "Above Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location, and moved off. Installed Closed-Loop System with steel tanks. Hauled contents from Closed-Loop System to approved NMOCD disposal location according to Rule 19.15.17.

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 10/30/2019

Type or print name Laura Pina E-mail address: lpina@legacylp.com PHONE: 432-689-5273

For State Use Only

APPROVED BY: *Kerry Fortner* TITLE C.O. A DATE 11-14-19
 Conditions of Approval (if any):