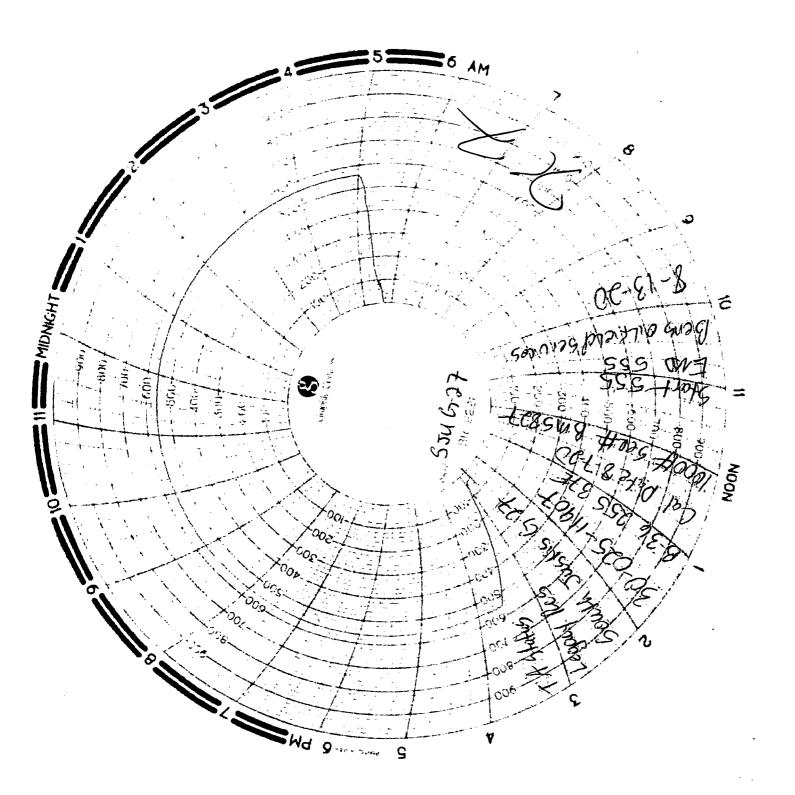
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103		
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013		
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		WELL API NO. 30-025-11907		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE 🛛 FEE 🗌		
District IV - (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fc, NM 87505				
1	ICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPL"	SOUTH JUSTIS UNIT G			
		8. Well Number 27		
1. Type of Well: Oil Well 2. Name of Operator	Gas Well Other ACY RESERVES OPERATING LP	9. OGRID Number		
LEG	240974			
3. Address of Operator	10. Pool name or Wildcat			
P.O. F	BOX 10848, MIDLAND, TX 79 RECEIVED	JUSTIS;BLINEBRY-TUBB-DRINKARD		
4. Well Location				
Unit Letter <u>B</u>	: <u>330</u> feet from the <u>NORTH</u> line and	<u>1650</u> feet from the <u>EAST</u> line		
Section 36	Township 25S Range 37E	NMPM County LEA		
	11. Elevation (Show whether DR, RKB, RT, GR, etc. 3044' GR			
L				
12. Check	Appropriate Box to Indicate Nature of Notice,	Report or Other Data		
		-		
PULL OR ALTER CASING	— — — — — — — — — —			
	— • • • • •	_		
CLOSED-LOOP SYSTEM	1	_		
OTHER:	DITHER: RAN N pleted operations. (Clearly state all pertinent details, an	AIT FOR TA EXTENSION		
	ork). SEE RULE 19.15.7.14 NMAC. For Multiple Co			
proposed completion or re				
Legacy requests the current TA	status be extended for one year due to the current situa	tion the oil industry is in.		
	-	2		
08/12/20 Pap MIT processed	agging to \$55# OCD notified but not witnessed. Char	t is attached		
06/15/20- Kan Will, pressared	casing to 555#. OCD notified, but not witnessed. Char	t is attached.		
	FINAL TA STATUS- EXTENSIO	N		
	Approval of TA EXPIRES: $(L-1-2)$	-		
	Well needs to be PLUGGED OR RETURN	NED		
		A		
	BY THE DATE STATED ABOVE:	F		
Spud Date:				
Spuu Date.				
I hereby certify that the information	above is true and complete to the best of my knowledg	ge and belief.		
10.11				
SIGNATURE		DINATOR DATE 8/19/2020		
SIGNATURE				
Type or print nameMELANIE	REYES E-mail address: mreyes@legacy	reserve <u>s.com</u> PHONE: <u>432-221-6358</u>		
For State Use Only				
APPROVED BY:	Jut TITLE C O	A DATE \$ -70-70		
Conditions of Approval (if any)				



8.13.20 G-97 3 JU G-97

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State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name LEGACY RESERVES			* API Number 30-025-11907		
Property Name SOUTH JUSTIS					
^{7.} Surface Location	n				
Feet from 330	N/S Line N	Feet From 1650	E/W Line E	County LEA	
Well Status	-				
INJECTOR	WD 61L	PRODUCER	s 8-13		
,	/ Name H JUSTIS ^{7.} Surface Locatio Feet from 330 Well Status INJECTOR	/ Name H JUSTIS ^{7.} Surface Location Feet from N/S Line 330 N Well Status INJECTOR	A JUSTIS '. Surface Location '. Surface Location Feet from 330 NNS Line Feet From 330 N 1650 Well Status	Serves 30-025-11 Name Well H JUSTIS * * Surface Location * Feet from N/S Line Feet from E/W Line 330 N 1650 E Well Status *	

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	Ó	.		Ø	Ð
Flow Characteristics	/				
Puff	<u>()</u> / N	Y / N	Y / N	O N	- CO2
Steady Flow	Y / Ø	Y / N	Y / N	Y / 🚱	WTR
Surges	Y/	Y/N	Y / N	Y/O	GAS
Down to nothing	€// N	Y/N	Y / N	Ø/ N	Injected for Waterflood if
Gas or Oil	Y / Z	¥ / N	Y/N	¥ / 🕅	applics.
Water	Y / 🕅	Y/N	Y / N	Y / N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

T/A STATUS MIT

Signature: Dusta Reech		OIL CONSERVATION DIVISION		
Printed name: DUSTIN REEDER		Entered into RBDMS		
Title:		Re-test		
E-mail Address: DREEDE	R@LEGACYRESERVES.COM	N X		
Date: 8-13-20	Phone:			
	Witness:			