

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

May 27, 2004

WELL API NO.

30-025-10422

5. Indicate Type of Lease

STATE ☐FEE ☒

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement  
NameLANGLIE MATTIX PENROSE SAND  
UNIT

8. Well Number 31

9. OGRID Number 240974

10. Pool name or Wildcat

LANGLIE MATTIX-7RVRS-QN-GRBG

## 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 WIW

2. Name of Operator LEGACY RESERVES OPERATING LP

3. Address of Operator P.O. BOX 10848  
MIDLAND, TX 79702

4. Well Location

Unit Letter H : 1980 feet from the NORTH line and 860 feet from the EAST line.  
Section 22 Township 22S Range 37E NMPM LEA County11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3355' GRPit or Below-grade Tank Application ☐ or Closure ☐Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface  
water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: EVALUATE AND REPAIR CASING LEAK ☒

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

ESTIMATED START DATE: 9/15/08

MIRU. POH w/ 7" inj pkr and IPC tbq. Run casing inspection log from 3380'-0'. RIH w/ pkr and BP. Set and pressure test at various depths to verify any potential leaks indicated on inspection log. Dependent on results, will likely perform cement squeeze job or run 4 1/2" liner to repair production casing. Run MIT test once csg repaired. RIH w/ inj pkr and IPC tbq. Put well back on wtr injection.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.SIGNATURE Kent Williams TITLE: SENIOR ENGINEER DATE 9/9/2008

Type or print name KENT WILLIAMS

E-mail address:

Telephone No. (432) 689-5200

For State Use Only

OCD FIELD REPRESENTATIVE II/STAFF MANAGER

APPROVED

BY: Carmy D. Hill

TITLE

DATE

Conditions of Approval (if any):

SEP 15 2008