Submit 3 Copies To Appropriate District Office District I State of New Mexico Energy, Minerals and Natural Resource	Form C-103
1625 N French Dr., Hobbs, NM 88240	WELL API NO.
1301 W. Grand Artesia MM OIL CONSERVATION DIVISION 88210 1220 South St. Francis Dr.	30-025-28693
District III 1000 Rio Brazos Rd , Aztec NM 7 0 7 2008 Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
87410 <u>District IV</u>	o. State on a Gas Lease No.
District IV 1220 S. St. Francis Dr. Saita Fr. NM 87505	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement A Name
PROPOSALS.)	LANGLIE MATTIX PENROSE SANØ
1. Type of Well: Oil Well Gas Well X Other WIW	UNIT
2 Name of Oraceton 15040V55555	8. Well Number 367
2. Name of Operator LEGACY RESERVES OPERATING LP	9. OGRID Number 240974
3. Address of Operator P.O. BOX 10848 MIDLAND, TX 79702	10. Pool name or Wildcatl Langlie Mattix; 7Rvrs-Qn-Grayburg
4. Well Location	
Unit Letter A: 990 feet from the NORTH line and _ Section 34 Township 22S Range 375	10 feet from the <u>EAST</u> line.
Section 34 Township 22S Range 37E 11. Elevation (Show whether DR, RKB, RT, C	NMPM LEA County
3314' GL Pit or Below-grade Tank Application ☐ or Closure ☐	л, ес.)
Pit typeDepth to GroundwaterDistance from nearest fresh water well_	Distance
water	Distance from nearest surface
Pit Liner Thickness: mil Below-Grade Tank: Volume	bbls; Construction Material
40.01.4.4	
12. Check Appropriate Box to Indicate Nature of Notice	ce, Report or Other Data
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO	BSEQUENT REPORT OF:
TEMPORARILY ABANDON CHANGE PLANS COMMENCE D	PRK ☐ ALTERING CASING ☐ RILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEME	NT JOB
OTHER: OTHER:	Mechanical Integrity Test⊠
13. Describe proposed or completed operations. (Clearly state all pertinent estimated date of starting any proposed work). SEE RULE 1103. For Midiagram of proposed completion or recompletion.	dotaile and since and it
diagram of proposed completion or recompletion.	uttiple Completions: Attach wellbore
9/24/08 Pressure tested to 580#, held 30 mins, OK. Chart attacks at	
9/24/08 Pressure tested to 580#, held 30 mins, OK Chart attached	. Witnessed by Sylvia Dickey.
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hereby certify that the information above is true and complete to the best of my koit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines alternative OCD-approved plan \Box .	nowledge and belief. I further certify that any
SIGNATURE Der TITLE: Production Superintendent	
	DATE: 10/6/08
Sor State Use Only E-mail address:	Telephone No. (432) 689-5200
ADDDOVED A A	
APPROVED APPRESENTATIVE II	STAFF MANAGED 0CT 08 2008
APPROVED BY: TITLE Conditions of Approval (if any):	STAFF MANAGE 0 CT 0 8 2008

