Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 8	Energy, Minerals and Natural Resources	WELL API NO. /
D: ( ) ( )		30-025-31863
88210 District III	RECEIN GONSERVATION DIVISION GONSERVATION DIVISION	5. Indicate Type of Lease  STATE  FEE
1000 Rio Brazos Rd., Aztec, NM	JAN 2 4 2011 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa F\( \)		
01000	NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement
(DO NOT USE THIS FORM FOR DIFFERENT RESERVOIR. USE PROPOSALS.)	PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Name SOUTH JUSTIS UNIT E
1. Type of Well: Oil Well	☐ Gas Well ☐ Other X / ፲ —	8. Well Number 220
2. Name of Operator	LEGACY RESERVES OPERATING LP /	9. OGRID Number 240974 /
	P.O. BOX 10848	10. Pool name or Wildcat
	MIDLAND, TX 79702	JUSTIS-BLINEBRY-TUBB-DRINKARD /
Well Location     Unit Letter    M	: 80 feet from the SOUTH line and	300 feet from the West line.
Section 24	Township T25S Range R37E	NMPM LEA County
	11. Elevation (Show whether DR, RKB, RT, GR, 3069' GR	etc.)
Pit or Below-grade Tank Applica	m 300 F-100	STATE MENTAL WAS STORY OF THE STATE OF
Pit typeDepth to	GroundwaterDistance from nearest fresh water well	Distance from nearest surface
water		
Pit Liner Thickness:	mil Below-Grade Tank: Volumet	oblis; Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE C PERFORM REMEDIAL WOR		SEQUENT REPORT OF:  K □ ALTERING CASING □
TEMPORARILY ABANDON	☐ CHANGE PLANS ☐ COMMENCE DRI	<del>_</del>
PULL OR ALTER CASING	☐ MULTIPLE COMPL ☐ CASING/CEMEN	г ЈОВ 🗆
OTHER:	☐ OTHER:	Well Sign 🛛
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.		
1/6/11 – Well sign corrected per Letter of Violation dated October 19, 2010.		
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 DATE: 01/14/2011		
	<i>)</i> y <u>Johnson</u>	Telephone No. (432) 689-5200
For State Use Only		
APPROVED BY:	now TITLE STAFF ME	DATE 1-25-2011
Conditions of Approval (if ar	ny):	- /

&