

4. Location of Well (Footage, Sec., T., R., M., or Survey Description) See attached	11. Country or Parish, State Lea, NM
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12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed.

Form 3160-5 (October 2024)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	FORM APPROVED OMB No. 1004-0220 Expires: October 31, 2027
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <i>Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.</i>		5. Lease Serial No. See attached
		6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

7. If Unit of CA/Agreement, Name and/or No. Multiple

completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Legacy Reserves Operating, LP wishes to withdraw/cancel the following expired and otherwise unapproved APDs in Lea County New Mexico.:

- US Well Number Well Name Well Number
  - 3002536708 ANTEATER FEDERAL 1
  - 3002536711 ANTEATER FEDERAL 4
  - 3002536707 ANTEATER FEDERAL 6
  - 3002545573 LEA UNIT 101H
  - 3002545900 LEA UNIT 120H
  - 3002545995 LEA UNIT 202H
  - 3002545996 LEA UNIT 203H
  - 3002545902 LEA UNIT 220H
  - 3002545903 LEA UNIT 221H
  - 3002544301 LEA UNIT 52H
  - 3002544252 LEA UNIT 53H
  - 3002549499 LEA UNIT 68H
  - 3002545901 LEA UNIT 702H
- See attached page for additional details.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Dwight Mallory	Title Director, Environmental, Health & Safety
Signature <i>Dwight Mallory</i>	Date 10/27/2025

**THE SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by <i>[Signature]</i>	Title <i>Sep PE</i>	Date <i>10/28/2025</i>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office <i>CFO</i>	

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
See attached

11. County or Parish, State  
Eddy, New Mexico

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site

Form 3160-5  
(October 2024)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.**

FORM APPROVED  
OMB No. 1004-0220  
Expires: October 31, 2027

5. Lease Serial No.  
See Attached

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.  
Multiple

1. Form 3160-5 and Form 3160-6 must be used only when an application, including reclamation, has been completed and the operator has determined that the site is ready for final inspection.)

Legacy Reserves Operating, LP wishes to withdraw/cancel the following expired and otherwise unapproved APDs in Eddy County New Mexico:

- US Well Number Well Name Well Number
- 3001535826 DONNER 30 FEDERAL 1
- 3001539905 MOOSE 23 FEDERAL 3H
- 3001534187 RED LAKE SAND UNIT 53Q
- 3001534188 RED LAKE SAND UNIT 55Q
- 3001534180 RED LAKE SAND UNIT 56Q
- 3001534182 RED LAKE SAND UNIT 58Q

See attached pag for additional details.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)  
Dwight Mallory

Title  
Director, Environmental, Health & Safety

Signature  
*Dwight Mallory*

Date  
10/27/2025

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by  
*Chs Wells*

Title  
*Sup P.E.*

Date  
*10/28/2025*

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office  
*CFO*

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(Instructions on page 2)

Sante Fe Main Office  
Phone: (505) 476-3441

General Information  
Phone: (505) 629-6116

Online Phone Directory  
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico  
Energy, Minerals and Natural Resources  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 522205

CONDITIONS

Operator: LEGACY RESERVES OPERATING, LP PO Box 267 Denver, CO 80201	OGRID: 240974
	Action Number: 522205
	Action Type: [C-103] Sub. APD Cancellation (C-103C)

CONDITIONS

Created By	Condition	Condition Date
ahvermersch	None	12/1/2025