new Mexico Oil Conservation Division, Distract a Mis N.

Francisco.

Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR

res escab Erack Beive	FORM APPROVED OMB No. 1004-0137 Expires: Qctober 31, 2014
5. Lease Serial No. NMNM105885	Expires to cope 31, 2014

BUREAU OF LAND MANAGEMENT				5. Lease Serial No. NMNM105885	OCD Sagon		
Do not use this t	IOTICES AND REPC form for proposals t Use Form 3160-3 (A	o drill or to re-	enter an	6. If Indian, Allottee	or Thipse Name 2 2013		
SUBMIT IN TRIPLICATE – Other instructions on p			ge 2.	7. If Unit of CA/Agreement Name and/or No. NMNM125711			
1. Type of Well Gas Well Other				8. Well Name and No Hercules Federa	8. Well Name and No. Hercules Federal Com #1H		
2. Name of Operator Legacy Reserves Operating LP				9. API Well No. 30-005-27999	9. API Well No. 30-005-27999		
3a. Address PO Box 10848, Midland, TX 79702 3b. Phone 1		3b. Phone No. (incl	lude area code,	3	10. Field and Pool or Exploratory Area Abo/Wolfcamp Wildcat		
		432-689-5200		Abo/Wolfcamp V			
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) 1980' FNL & 330' FWL, Unit Letter E, Sec. 15, T-15-S, R-31-E)		•	11. County or Parish, State Chaves Co., NM		
12. CHEC	CK THE APPROPRIATE BO	X(ES) TO INDICAT	TE NATURE (OF NOTICE, REPORT OR OTI	HER DATA		
TYPE OF SUBMISSION	TYPE OF ACT			OF ACTION	NON		
Notice of Intent	Acidize Alter Casing Casing Repair	Deepen Fracture To		Production (Start/Resume) Reclamation Recomplete	Water Shut-Off Well Integrity Other Change of Operator		
Subsequent Report	Change Plans	Plug and A	Abandon	Temporarily Abandon			
Final Abandonment Notice	Convert to Injection	Plug Back		Water Disposal	ork and approximate duration thereof. It		
determined that the site is ready for Effective 01/01/2013 COG Open The undersigned accepts all agor portion thereof, as described Legacy Reserves Operating LF	erating, LLC transferred operating, LLC transferred operations, above.	, stipulations and re	estrictions cor	ncerning operations on the le	1035		
14. I hereby certify that the foregoing is a	rue and correct. Name (Printe	d/Typed)					
Ernie Hanson		Titl	Title Operations Manager				
Signature 7.1.2	Han	Dat	Date 01/01/2013				
	THIS SPACE	FOR FEDERA	L OR STA	TE OFFICE USE			
	ID R. GLA		Title	DLEUM ENGINEER	Date APR 1 0 2013		
Conditions of approval, if any, are attache that the applicant holds legal or equitable entitle the applicant to conduct operations	d. Approval of this notice does title to those rights in the subject thereon.	s not warrant or certify ct lease which would 04/12/13	Office				

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.