

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014

COPY

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.

SUBMIT IN TRIPLICATE – Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMN17432
2. Name of Operator Legacy Reserves Operating LP		6. If Indian, Allottee or Tribe Name
3a. Address PO Box 10848, Midland, TX 79702	3b. Phone No. (include area code) 432-689-5200	7. If Unit of CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29, T-13-S, R-31-E 1980 FNL, 1980 FEL; Lat 33.1629857 Long -103.8419172		8. Well Name and No. Oxy Federal Com 1
		9. API Well No. 30-005-21097
		10. Field and Pool, or Exploratory Area Chaves; Queen Gas Area SE
		11. County or Parish, State Chaves County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

09/05/14 MIRU plugging equipment. Dug out cellar.

09/09/14 ND wellhead, NU BOP. Release packer and POH w/ tbg. RIH open ended to 2600'. Circulated hole w/ mud laden fluid. Spotted 20' sx cement w 2 % CACL @ 2600-2230. POH w/ tbg to 1300'. WOC.

09/10/14 Tagged plug @ 2253'. POH w/ tbg to 1770'. Pressure tested casing and held 500 psi for 30 minutes. Spotted 25' sx cement w/ 2 % CACL @ 1770-1400. Pull out of cement. WOC. Tagged plug @ 1360'. Spotted 25' sx cement w/ 2 % CACL @ 1160-790. POH w/ tbg to 410. ND BOP.

09/11/14 Tagged plug @ 787'. Spotted 40' sx cement w/ 2 % CACL @ 410 to surface. rigged down, verified cement at surface. Moved off.

09/16/14 Moved in backhoe and welder. Dug out cellar. Cut off wellhead. Welded on "Below Ground Dry Hole Marker". Backfilled cellar. Removed deadmen. Cleaned location and moved off.

Installed Closed-Loop System with steel tanks. Hauled contents from Closed-Loop System to approved NMOCD disposal location according to Rule 19.15.17.

OCD Conditions of Approval

Accepted for **RECORD ONLY**. All Federal forms require **BLM APPROVAL**.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) FREDDIE GIBBS		Title PRODUCTION SUPERINTENDENT
Signature <i>Freddie Gibbs</i>		Date 09/17/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
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	

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).

Accepted for Record Only

MSS/OCD 9/22/2014

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