

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

HOBBS OCD

Submit one copy to appropriate District Office

SEP 07 2018 ☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TRANSPORT

¹ Operator name and Address LEGACY RESERVES OPERATING LP PO BOX 10848 MIDLAND, TX 79702		² OGRID Number 240974
		³ Reason for Filing Code/ Effective Date NW/04-13-2018
⁴ API Number 30 - 025-44026	⁵ Pool Name LEA; BONE SPRING	⁶ Pool Code 37570
⁷ Property Code 302802	⁸ Property Name LEA UNIT	⁹ Well Number 56H

II. ¹⁰ Surface Location

Ul or lot no. B	Section 11	Township 20S	Range 34E	Lot Idn	Feet from the 170	North/South line N	Feet from the 1640	East/West line E	County LEA
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¹¹ Bottom Hole Location

Ul or lot no. G	Section 14	Township 20S	Range 34E	Lot Idn	Feet from the 2301	North/South line N	Feet from the 2224	East/West line E	County LEA
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
34053	PLAINS MARKETING, L.P. 500 DALLAS, STE. 700, HOUSTON, TX	OIL
24650	TARGA MIDSTREAM SERVICES LLC 1000 LOUISIANA, STE. 4700, HOUSTON, TX 77002	GAS

IV. Well Completion Data

²¹ Spud Date 10/15/2017	²² Ready Date 04/13/2018	²³ TD 16,740' MD	²⁴ PBSD 16,690'	²⁵ Perforations 9,417'-16,740'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	1,735'	1500 sx		
12 1/4"	9 5/8"	5,410'	3450 sx		
8 3/4"	5 1/2"	16,740'	2900 sx		
	2 7/8"	8,876'			

V. Well Test Data

³¹ Date New Oil 05/01/2018	³² Gas Delivery Date 05/01/2018	³³ Test Date 05/06/2018	³⁴ Test Length 24 HRS	³⁵ Tbg. Pressure 396	³⁶ Csg. Pressure 320
³⁷ Choke Size	³⁸ Oil 1080	³⁹ Water 2634	⁴⁰ Gas 1606		⁴¹ Test Method Pumping

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Laura Pina*

Printed name:
LAURA PINA

Title:
COMPLIANCE COORDINATOR

E-mail Address:
lpina@legacylp.com

Date:
09/06/2018

Phone:
432-689-5200

OIL CONSERVATION DIVISION

Approved by: *Karen Sharp*

Title: *Staff Mgr*

Approval Date:
9-10-18

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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**
SEP 07 2018

5. Lease Serial No.
NMNM06531A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
LEA UNIT 56H

9. API Well No.
30-025-44026

10. Field and Pool or Exploratory Area
LEA; BONE SPRING

11. County or Parish, State
LEA CO COUNTY, NM

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
LEGACY RESERVES OPERATING LP-Mail: lpina@legacylp.com

Contact: LAURA PINA
3b. Phone No. (include area code)
Ph: 432-689-5200

3a. Address
303 W WALL ST STE 1800
MIDLAND, TX 79701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 11 T20S R34E NWNE 170FNL 1640FEL

12. CHECK THE 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"/> 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 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 must 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 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 is ready for final inspection.

02/22/2018 Ran Gamma Ray/CCL log

03/02/2018 to 03/12/2018 Perf Bone Spring fr/9,417'-16,740' MD w/1,050 shots. Treated well w/2,791 bbls 10% acid, 9,408,621# sand and 235,613 BW

04/09/2018 to 04/12/2018 Drilled out plugs

04/13/2018 Began flowback operations

04/13/2018 Date of first production

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #434170 verified by the BLM Well Information System
For LEGACY RESERVES OPERATING LP, sent to the Hobbs**

Name (Printed/Typed) LAURA PINA

Title COMPLIANCE COORDINATOR

Signature (Electronic Submission)

Date 09/06/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____
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.

Title _____

Office _____

Documents pending BLM approvals will
subsequently be reviewed and scanned

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

Department or agency of the United

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

COPY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

HOBBS OCD
SEP 07 2018
RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM06531A	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
2. Name of Operator LEGACY RESERVES OPERATING LP-Mail: jsaenz@legacyp.com		7. Unit or CA Agreement Name and No.	
3. Address 303 W WALL ST STE 1800 MIDLAND, TX 79701		8. Lease Name and Well No. LEA UNIT 56H	
3a. Phone No. (include area code) Ph: 432-689-5200		9. API Well No. 30-025-44026	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 11 T20S R34E Mer At surface NWNE 170FNL 1640FEL At top prod interval reported below Sec 14 T20S R34E Mer At total depth SWNE 2301FNL 2224FEL		10. Field and Pool, or Exploratory LEA; BONE SPRING	
14. Date Spudded 10/15/2017		15. Date T.D. Reached 11/04/2017	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 04/13/2018		17. Elevations (DF, KB, RT, GL)* 3662 GL	
18. Total Depth: MD 16740 TVD 9587		19. Plug Back T.D.: MD 16690 TVD 9587	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR-CCL	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)			

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.5	0	1735		1500		0	
12.250	9.625 J-55	40.0	0	5410		3450		0	
8.750	5.500 HCP-110	20.0	0	16740		2900		0	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	8876							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9417	16740	9417 TO 16740		1050	PRODUCING
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9417 TO 16740	TREAT WELL W/2,791 BBLs ACID, 9,408,621# SAND & 235,613 BBLs WTR

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
05/01/2018	05/06/2018	24	→	1080.0	1606.0	2634.0	38.0	0.60	ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. SI	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	396	320.0	→	1080	1606	2634	1487	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. SI	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #434173 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Documents pending BLM approvals will
subsequently be reviewed and scanned

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BONE SPRING	8320	8840		BELL	5567
1ST BONE SPRING	9489	10136		BRUSHY CANYON	6569
2ND BONE SPRING	10136	10868		BONE SPRING	8320
3RD BONE SPRING	10868	10996		1ST BONE SPRING	9489
				2ND BONE SPRING	10136
				3RD BONE SPRING	10868

32. Additional remarks (include plugging procedure):

DIRECTIONAL SURVEY ATTACHED. LOG WILL BE MAILED TO THE BLM CARLSBAD OFFICE.

33. Circle enclosed attachments:

- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7. Other: | |

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #434173 Verified by the BLM Well Information System.
For LEGACY RESERVES OPERATING LP, sent to the Hobbs**

Name (please print) JOHN SAENZ

Title OPERATIONS ENGINEER

Signature (Electronic Submission)

Date 09/06/2018

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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****