Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR

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

BUREAU OF LAND MANAGEMENT		5. Lease Serial No. LC 058514				
Do not use this	form for proposals	ORTS ON WELLS RE to drill or to re-enter a APD) for such proposa	n	6. If Indian, Allottee o	r Tribe Name	
	IT IN TRIPLICATE – Othe	r instructions on page 2.		7. If Unit of CA/Agree	ement, Name and/or No.	
I. Type of Well Oil Well Gas V	Well Other	(240971	\{	8. Well Name and No. Pearsall BX #3	(312103)	
2. Name of Operator Legacy Reserv	ves Operating LP	/		9. API Well No. 30-025-24725		
3a. Address PO Box 10848, Mid	dland, TX 79702	3b. Phone No. (include area co 432-689-5200	ode)	10. Field and Pool or E Maljamar; Graybu	Exploratory Area Irg-SA/Pearsall Queen	
 Location of Well (Footage, Sec., T. 1980' FSL & 1980' FWL, Unit Letter A, Sec 	•	n) /		11. County or Parish, S Lea Co., NM	State	
12. CHE	CK THE APPROPRIATE BO	OX(ES) TO INDICATE NATUR	E OF NOTIC	E, REPORT OR OTHI	ER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTI	CTION		
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Recla Recor	ction (Start/Resume) mation nplete orarily Abandon Disposal	Water Shut-Off Well Integrity. ✓ Other Change of Operator	
13. Describe Proposed or Completed C the proposal is to deepen direction Attach the Bond under which the following completion of the invol- testing has been completed. Final determined that the site is ready fo Effective 01/01/2013 COG Ope The undersigned accepts all ap or portion thereof, as described Legacy Reserves Operating LF	nally or recomplete horizontal work will be performed or proved operations. If the operations and the operation of final inspection.) Perating, LLC transferred operating operations, conditions dispose.	lly, give subsurface locations and rovide the Bond No. on file with a ion results in a multiple completion filed only after all requirement operations to Legacy Reserves as, stipulations and restrictions of	I measured and BLM/BIA. Re on or recomplets, including a Operating LF concerning o	d true vertical depths o equired subsequent repetion in a new interval, reclamation, have been	f all pertinent markers and zones. orts must be filed within 30 days a Form 3160-4 must be filed once completed and the operator has	
	SUBJECT T APPROVAL F			SEI CONDI	E ATTACHED FOR FIONS OF APPROVAI	

JUN 26 2013

					
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)					
Ernie Hanson	Title Operations Manager				
Signature Am2 Am	ate 01/01/2	013	7		
THIS SPACE FOR FEDERA	AL OR ST	ATE OFFICE-USE VED			
Approved by					
/s/ Jerry Blakley	Title	2 2 2013 Date	L .		
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certithat the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		JUN 2 2			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1213, make it a crime for any perso fictitious or fraudulent statements of presentations as to any matter within its jurisdiction.	n knowingly a	und willfülly to hake to any department of agency CARLSBAU FIELD UFFICE	of the United States any false,		
(Instructions on page 2)					

6/22/2013 Approved subject to Conditions of Approval. Recent Bond review. JDB

Change of Operator Conditions of Approval

Legacy Reserves Operating LP.

- 1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
- 2. Submit for approval of water disposal method.
- 3. Submit updated facility diagrams as per Onshore Order #3
- 4. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
- 6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
- 7. Subject to like approval by NMOCD.
- 8. Submit plan for approval of well operations for all TA/SI wells within 90 days of this approval to change operator.
- 9. If a well is not capable of production in paying quantities submit Notice of Intent to P&A or submit documentation proving that well is capable of production in paying quantities within 90 days of approval of change of operator.