	UNITED STATES				FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014 5. Lease Serial No.		
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.				NM-03844 6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE – Other instructions on page 2,10BBS OCD					7. If Unit of CA/Agreement, Name and/or No.		
I. Type of Well				8. Well Name and No. ROCK QUEEN UNIT #31			
2. Name of Operator LEGACY RESERVES OPERATING LP					9. API Well No. 30-005-00886		
3a. Address         3b. Phone           PO BOX 10848         432-60           MIDLAND, TX 79702         432-60			NL O		10. Field and Pool or Ex CAPROCK; QUEE		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)         1650 FNL & 1650 FEL, UNIT LETTER G, SEC. 27, T13S, R31E				11. County or Parish, State CHAVES CO., NM			
12. CHE	CK THE APPROPRIATE BC	X(ES) TO INDICAT	E NATURE OF	FNOTIC	E, RÉPORT OR OTHEI	R DATA	
TYPE OF SUBMISSION TYPE OF ACTION					ION		
Notice of Intent	Acidize	Deepen Fracture Tre	eat	_	ction (Start/Resume) mation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Constr	_	Recor		Other Change of Operator	
Final Abandonment Notice	Change Plans	Plug and Al	bandon		orarily Abandon Disposal		
Attach the Bond under which the following completion of the invol- testing has been completed. Final determined that the site is ready for Effective 05/16/2014 Celero Energy The undersigned accepts all applica thereof, as described above. Legacy Reserves Operating LP bor	ved operations. If the operations Abandonment Notices must for final inspection.) III, LP transferred operationable terms, conditions, stip add coverage pursuant to 43	on results in a multiple be filed only after all r uns to Legacy Reser ulations and restrict CFR 3104 for lease	e completion or requirements, in ves Operating ions concernir e activities is p	recompl actuding a LP. ng opera provided	etion in a new interval, a reclamation, have been c tions on the lease land	d or portion	
14. I hereby certify that the foregoing is	rue and correct. Name (Printed						
GREGG SKELTON Signature Margar Sha			Title OPERATIONS MANAGER Date 08/18/2014				
	THIS SPACE	FOR FEDERAL	OR STAT	F OFF			
Approved by		P\\$	nds And	told h	ingerer		
Conditions of approval, if any, are attache	ISI Angel Mayes		Title	Miner	" <b>ƏlS</b> Da	1e 8-24-14	
that the applicant holds legal or equitable i entitle the applicant to conduct operations	itle to those rights in the subject	t lease which would	Office	F	loswell Field Calins		
Title 18 U.S.C. Section 1001 and Title 43 fictitious or fraudulent statements or repr			nowingly and w	illfully to	make to any department of	or agency of the United States any false,	
(Instructions on page 2)					<b>SEP 08</b> 201	4. W	

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