

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBSOCD

FEB 09 2015

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.*

RECEIVED

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMLC062486
2. Name of Operator LEGACY RESERVES OPERATING LP-Email: lpina@legacyp.com		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 10848 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-689-5200 Ext: 5273	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T14S R31E NWNE 665FNL 1980FEL		8. Well Name and No. DRICKEY QUEEN SAND UNIT 816
		9. API Well No. 30-005-00985
		10. Field and Pool, or Exploratory CAPROCK; QUEEN
		11. County or Parish, and 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.)

01/26/15 MIRU plugging equipment. Dug out cellar. ND wellhead and NU BOP.  
01/27/15 RIH w/packer and set @ 2100 test top of liner and held 500 psi. POH. RIH open ended to 2275'. Pumped 10 bbls of mud laden fluid. Spotted 30 sx cement @ 2275-1979. POH WOC. Tagged plug @ 2000'. POH. Perf'd casing @ 1890'. Set packer @ 1590' and established injection rate.  
01/28/15 Squeezed 40 sx cement and displaced to 1790'. POH w/packer. WOC. Tagged plug @ 1750'. Circulated 42 bbls of mud laden fluid. POH w/tubing. Perf'd casing @ 1220' and 157'. RIH and set packer @ 720'. Pressured up on perfs and held 600 psi. POH w/packer. Spotted 25 sx cement @ 1270-1029 (per Bob Hoskinson with the BLM). POH WOC.  
01/29/15 Tagged plug @ 1050'. POH w/tubing. Set packer @ 30' and squeezed 45 sx cement and circulated to surface.  
01/30/15 Verified cement at surface. Rigged down and moved off.  
02/03/15 Move in backhoe and welder. Dug out cellar. Cut off wellhead. Welded on "Below Ground Dry

INT to PA  
P&A R  
CHG Loc  
E-PERMITTING  
P&A NR  
DHC COMP  
CSNG  
RBDMS  
TA

14. I hereby certify that the foregoing is true and correct. Electronic Submission #290646 verified by the BLM Well Information System For LEGACY RESERVES OPERATING LP, sent to the Roswell	
Name (Printed/Typed) LAURA PINA	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 02/05/2015

**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.

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

MAB/OCD 2/17/2015

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

FEB 18 2015

**Additional data for EC transaction #290646 that would not fit on the form**

**32. Additional remarks, continued**

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.