

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBSDCD

FEB 25 2015

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

COPY

## SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

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

☐ Oil Well ☐ Gas Well ☒ Other INJECTION

## 2. Name of Operator

LEGACY RESERVES OPERATING LP

## 3a. Address

PO BOX 10848  
MIDLAND, TX 79702

## 3b. Phone No. (include area code)

432-689-5200

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

665 FNL &amp; 990 FWL, UNIT LETTER D, SEC 4, T14S, R31E

5. Lease Serial No.  
NMLC062486

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
DRICKEY QUEEN SAND UNIT #8329. API Well No.  
30-005-0099310. Field and Pool or Exploratory Area  
CAPROCK; QUEEN11. County or Parish, State  
CHAVES CO., NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" 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 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.)

Haul off caliche, rip and restore location to natural contour landscape. Reseed during growing season.

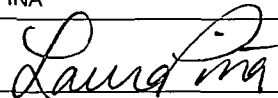
OCD for **RECORD ONLY**. All Federal  
forms require **BLM APPROVAL**.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

LAURA PINA

Title REGULATORY TECH

Signature



Date 02/19/2015

## 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.

(Instructions on page 2)

Entered for Record Only

MJB/OCD

3/2/2015

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