

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

COPY

**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 reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC062486
2. Name of Operator LEGACY RESERVES OPERATING LP Contact: JOHN SAENZ E-Mail: jsaenz@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	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 SWSE 990FSL 1650FEL		8. Well Name and No. DRICKEY QUEEN SAND UNIT 813
		9. API Well No. 30-005-00982
		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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construc
	<input type="checkbox"/> Change Plans
	<input checked="" type="checkbox"/> Plug and Aba
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back

**E-PERMITTING <SWD INJECTION>**  
**CONVERSION** \_\_\_\_\_ **RBDMS** \_\_\_\_\_  
**RETURN TO** \_\_\_\_\_ **TA** \_\_\_\_\_  
**CSNG** \_\_\_\_\_ **ENVIRO** \_\_\_\_\_ **CHG LOC** \_\_\_\_\_  
**INT TO PA** \_\_\_\_\_ **P&A NR** \_\_\_\_\_ **P&A R** \_\_\_\_\_

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 recomplete 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 recompletion 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.)

07/07/15 MIRU plugging equipment.

07/08/15 Dug out cellar. NU BOP.

07/09/15 RIH w/bit and tagged at 1999'. Circulated hole with mud laden fluid. Perf'd 5 1/2 casing at 1999'. Set packer at 1706 and pressured up on casing to 1700 psi. Spotted 40 sx cement at 1999 (per BLM). WOC.

07/10/15 Tagged plug at 1608'. Perf'd casing at 1175'. Set packer at 869 and sqz'd 40 sx cement w/2% CACL. Displaced to 1075'. WOC. Tagged plug at 1061'. Circulated hole w/mud laden fluid. Set packer at 248' and sqz'd 40 sx cement into casing leak at 514 to 548. Displaced cement to 467'. WOC.

07/13/15 Tagged plug at 434'. Circulated hole w/mud laden fluid. Perf'd casing at 152'. Set packer at 3' and sqz'd 80 sx cement to surface. Rigged down and moved off.

07/22/15 Moved in backhoe and welder. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #314166 verified by the BLM Well Information System</b> <b>For LEGACY RESERVES OPERATING LP, sent to the Roswell</b>	
Name (Printed/Typed) JOHN SAENZ	Title OPERATIONS ENGINEER
Signature (Electronic Submission)	Date 08/26/2015

## 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 \*\*

Accepted for Record Only

MJB/OCD 9/1/2015

SEP 01 2015

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

**Additional data for EC transaction #314166 that would not fit on the form**

**32. Additional remarks, continued**

Hole Marker." 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.