

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OCD

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



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.

SEP 10 2015

RECEIVED

5. Lease Serial No.  
NMNM01747

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

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

7. If Unit of CA/Agreement, Name and/or No.  
NM70976B LEA UNIT BONE SPRING

8. Well Name and No.  
LEA UNIT #32H

9. API Well No.  
30-025-42342

10. Field and Pool or Exploratory Area  
LEA, BONE SPRING

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

2' FSL & 1790' FEL, SEC. 12, T20S, R34E

11. County or Parish, State  
LEA 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 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 checked="" type="checkbox"/> Other CHANGE TO	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	ORIGINAL APD	
	<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.)

LEGACY RESERVES OPERATING RESPECTFULLY REQUESTS TO CHANGE THE BOP FROM A 3 RAM TO A 2 RAM. ATTACHED IS A BOP SCHEMATIC.

Accepted for Record Only

SUBJECT TO BLM APPROVAL

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

CRAIG SPARKMAN

Title OPERATIONS ENGINEER

Signature

Date 09/04/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

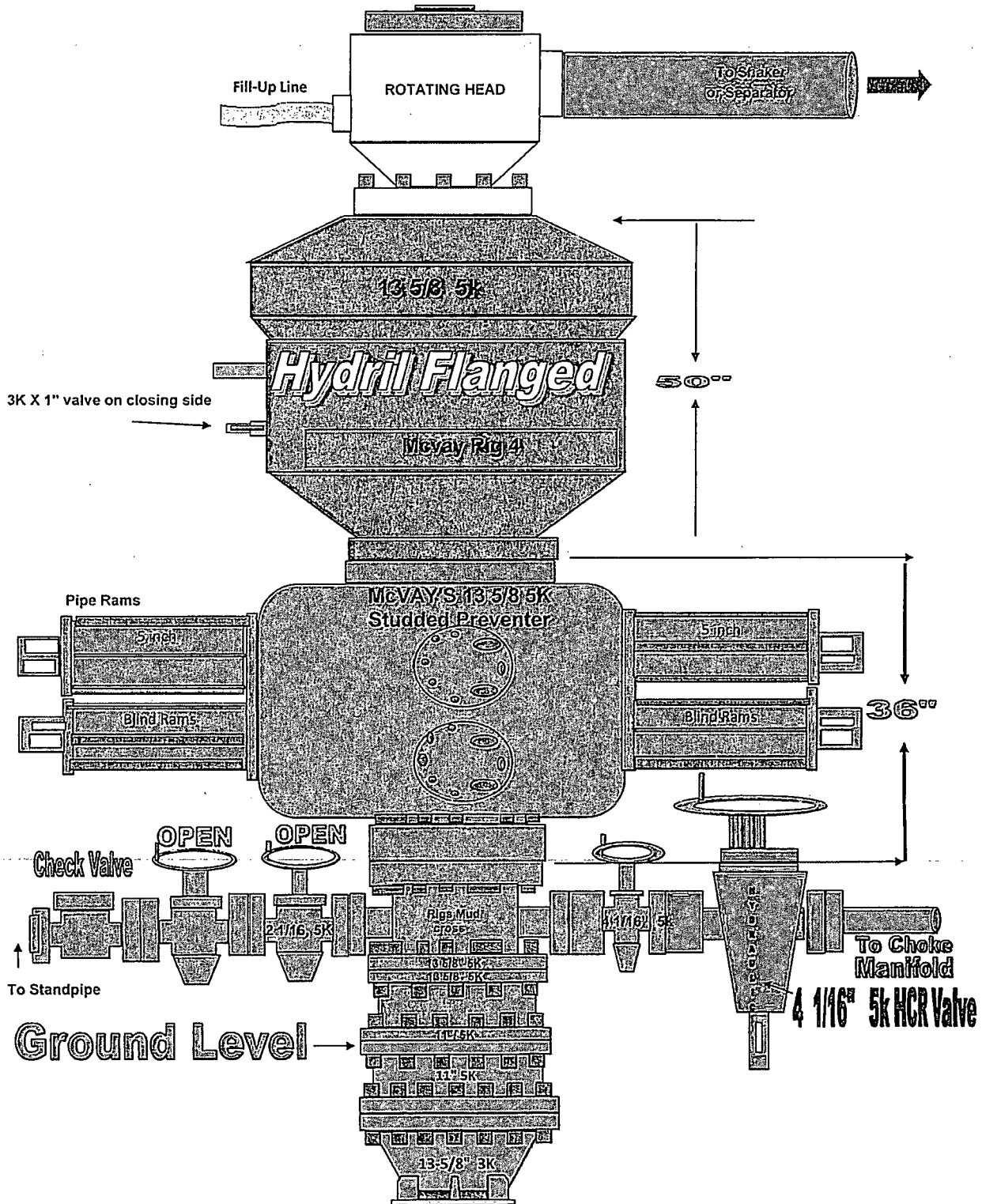
Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

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.

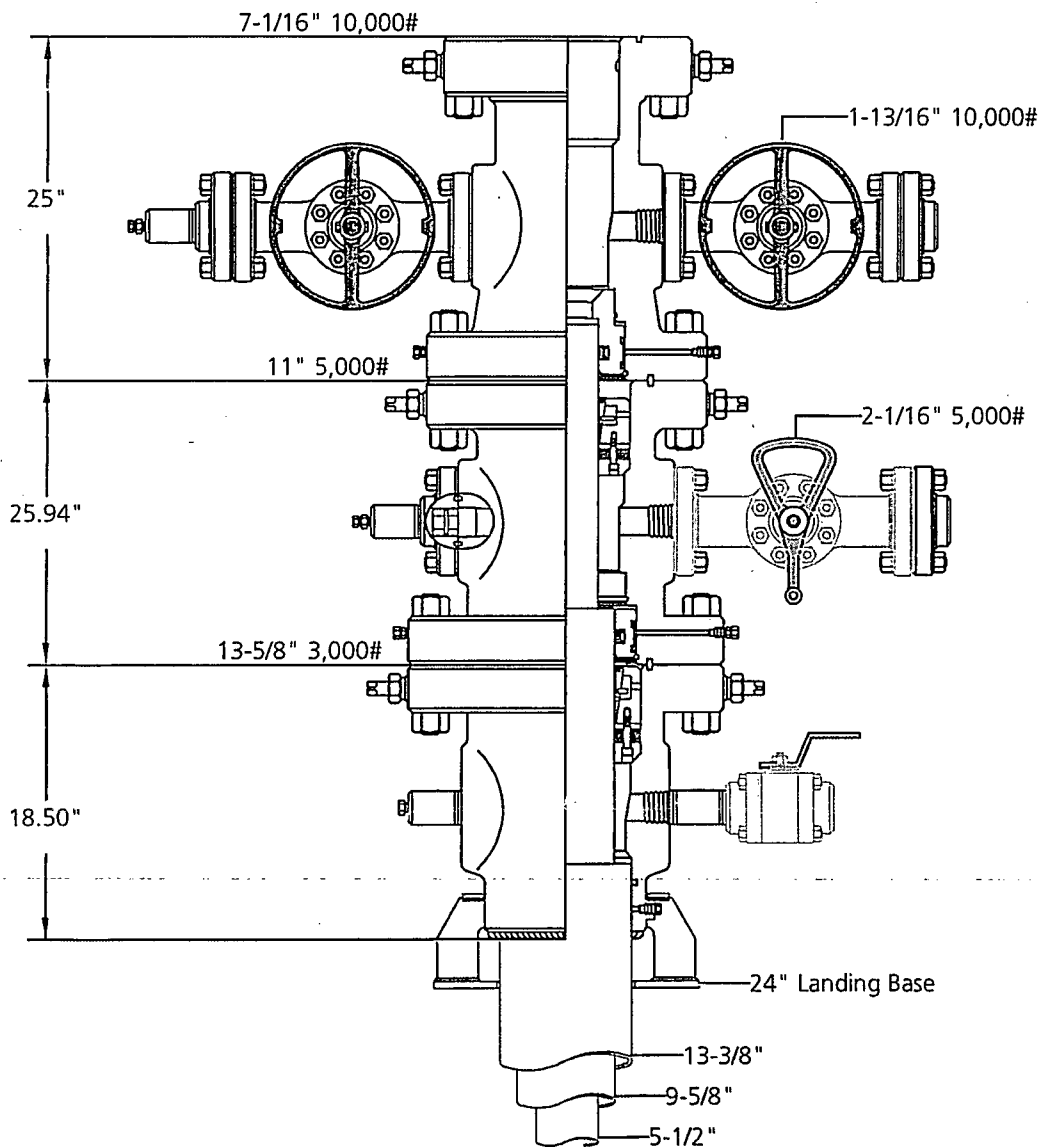
(Instructions on page 2)

SEP 14 2015

# McVay Rig 4



Note: Dimensional information reflected on this drawing are estimated measurements only.



Legacy Reserves  
Conventional 3-String



Name: Jeanette	Date: 7-15-15	Working Pressure:	# 1274616
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