Form 3160-5 (November 1994)	UNITED STATE	28	NMOCI	FC	DRM APPROVED			
HOBBS OGE	OMB No. 1004-0135 Expires July 31, 1996							
DEC FUNDRY N	5. Lease Serial No.							
Do not use this	form for proposals to	drill or to re-enter	er an		NMNM0523202			
RECEIVE	I. Use Form 3160-3 (AP	D) for such prop	osals.	6. If Indian, Allo	ttee or Tribe Name			
	ICATE – Other insti	ructions on rev	verse side	7. If Unit or CA/.	Agreement, Name and/or No			
1. Type of Well	8. Well Name and No.							
Oil Well Gas We	LONESTAR FEDERAL #1							
2. Name Of Operator	9. API Well No.							
LEGACY RECLAMATION PRO	JECT / ROGER HANKS OI		30-041-20196					
3a. Address N/A	3b. Phone No. (include area code) N/A		10. Field and Pool, or Exploratory Area UNKNOWN					
4. Location of Well (Footage, Sec	., T., R., M., or Survey Descr		11. County or Parish, State					
SEC. 29, T. 08 S., R. 36 E			ROOSEVELT, NM					
12. CHECK APP	E, REPORT, OR	OTHER DATA						
TYPE OF SUBMISSION		TYPE OF ACTION						
	Acidize	Deepen	Productio	on (Start/Resume)	Water Shut-Off			
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	tion	Well Integrity			
Subsequent Report	Casing Repair	New Construc	tion 🗌 Recompl	ete	Other			
Final Abandonment Notice	Change Plans	Plug and Aban	idon 🗌 Tempora	rily Abandon	8 × 1			
Final Abandonment Nonce	Convert to Injection	Plug Back	Water Di	sposal				
and zones. Attach the Bond unwithin 30 days following complete	epen directionally or recomplete der which the work will be pe etion of the involved operation en completed. Final Abandonr	e horizontally, give sub rformed or provide the s. If the operation resu ment Notices shall be fil	surface locations and me Bond No. on file with alts in a multiple complete	easured and true vert BLM/BIA. Require etion or recompletion	ed work and approximate duration ical depths of all pertinent markers d subsequent reports shall be filed n in a new interval, a Form 3160-4 amation, have been completed, and			
BLM WILL INTERNAL DEFUNCT.	LY GENERATE A (I	FAN) FOR APP	ROVAL SINCE	THIS OPERAT	TOR APPEARS TO BE			
PIPELINE APPURTE OF PROCEDURAL N WELL SHOULD BE C	OTES ENSURES IG	NORANCE. VI			NGER THERE. LACK ACCEPTABLE AND			
14. I hereby certify that the foregoin	ing is true and correct							
Name (Printed/Typed) Title Title NATURAL RESOURCE SPECIALIST								
Signiture Date NA				UNAL RESCORCE SPECIALIST				
MMM	Stander		12	18/16				
1	THIS SPACE F	OR FEDERAL O	R STATE OFPIC	EUSE				
Approved By	obert Hoskinso	n	Title	Acting	DEC 1 4 2016			
Conditions of approval, if any, are or certify that the applicant holds lega which would entitle the applicant to o	al or equitable title to those right	t Office ROS	ROSWELL FIELD OFFICE					
Title 18 U.S.C. Section 1001, makes								
fraudulent statements or representation	ons as to any matter within its ju	urisdiction.	FOR REC	ORD ONI	Y			
(Instructions on reverse)			MW/OCD	12/20/20	216			