

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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 page 2

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMLC060944
2. Name of Operator LEGACY RESERVES OPERATING LP		6. If Indian, Allottee or Tribe Name
3a. Address 303 W.WALL ST. STE. 1800 MIDLAND, TX 79701		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-689-5200		8. Well Name and No. SOUTH JUSTIS UNIT 'C' 160
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T25S R37E SWNE 1500FNL 2250FEL		9. API Well No. 30-025-32085
		10. Field and Pool or Exploratory Area JUSTIS
		11. County or Parish, State LEA CO COUNTY, 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"/> Hydraulic Fracturing	<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 type="checkbox"/> Plug and Abandon	<input checked="" 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.

PROCEDURE: Perform and record MIT test. Submit chart to Midland for filing.

REASON: We are requesting the TA status be extended for 1 year to allow us to study the reservoir response before returning the well to injection. We are studying the loss of injection in the area to determine the effect it will have in the ultimate recovery of the unit.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #370447 verified by the BLM Well Information System For LEGACY RESERVES OPERATING LP, sent to the Hobbs	
Name (Printed/Typed) JOHN SAENZ	Title OPERATIONS ENGINEER
Signature (Electronic Submission)	Date 03/21/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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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.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it
States any false, fictitious or fraudulent statements or represent

person knowingly and willfully to make to any department or agency of the United States within its jurisdiction.

(Instructions on page 2)

** OPERATOR-SUBM

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** OPERATOR-SUBMITTED

** OPERATOR-SUBMITTED **

Accepted for Record Only

msb/ecd 3/27/2017