

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOE

JAN 16 2018

FORM 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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM080262
2. Name of Operator LEGACY RESERVES OPERATING LP Contact: MATT DICKSON E-Mail: mdickson@legacylp.com		6. If Indian, Allottee or Tribe Name
3a. Address 303 W WALL ST STE 1800 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-689-5200 Ext: 5204	7. If Unit or CA/Agreement, Name and/or No. NMNM70976X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T20S R34E 170FNL 1115FEL		8. Well Name and No. LEA UNIT 58H
		9. API Well No. 30-025-44027
		10. Field and Pool or Exploratory Area LEA; BONE SPRING
		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 checked="" 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.

Legacy Reserves respectfully request permission to temporarily stop work on the subject well and remove drilling rig from location for a brief period.

The 13-3/8" surface casing was set at 1,812' MD. Surface casing was cemented as per the approved APD drilling program and conditions of approval, with cement circulated to surface. The 13-5/8", 3k wellhead was installed and pressure tested. The subject well was drilled to 5,620' MD. The 9-5/8" intermediate casing was ran and cemented as per the approved APD drilling program and conditions of approval, with cement circulated to surface. The 13-5/8" x 11", 5k "B-section" was installed and pressure tested. The subject well was temporarily secured by installing the 11" x 7-1/6", 10k tubing spool and pressure testing it as well. We also utilized a float shoe and float collar and flow checked the well after the primary cement job to ensure the floats held.

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JAN 16 2018

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14. I hereby certify that the foregoing is true and correct.

Electronic Submission #400198 verified by the BLM Well Information System
For LEGACY RESERVES OPERATING LP, sent to the Hobbs

Name (Printed/Typed) MATT DICKSON	Title DRILLING ENGINEER
Signature (Electronic Submission)	Date 01/09/2018

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)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

KZ

Additional data for EC transaction #400198 that would not fit on the form

32. Additional remarks, continued

Legacy expects to resume operations on the subject well in approximately 2-3 weeks time. At which time, all operating procedures will be followed as outlined in the approved APD program and BLM conditions of approval.

Please feel free to contact me with any questions or concerns.