

**BEFORE THE OIL CONSERVATION DIVISION
EXAMINER HEARING OCTOBER 5, 2023**

Case Nos. 23804 & 23809

Ruby Fed Com 501H
Ruby Fed Com 502H

Lea County, New Mexico



LEGACY
RESERVES

**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

APPLICATIONS OF LEGACY RESERVES AMEND ORDER NO. R-22392, LEA COUNTY, NEW MEXICO.

CASE NOS. 23804
(Formerly Case 22230)

**APPLICATION OF LEGACY RESERVES OPERATING LP
TO AMEND ORDER NO. R-22394, LEA COUNTY, NEW MEXICO.**

CASE NOS. 23809
(Formerly Case 22231)

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**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF LEGACY RESERVES
OPERATING LP TO AMEND ORDER NO. R-22392,
LEA COUNTY, NEW MEXICO**

Case No. _____
(Formerly Case 22230)

APPLICATION

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22392 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22392, entered on November 17, 2022, in Case No. 22230, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W½E½ of Section 15 and W½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Ruby Fed Com 501H well.

2. Paragraph 19 of Order No. R-22392 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22392 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22392 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Ruby Fed Com 501H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22392 to November 17, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

By: 

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Attorney for
Legacy Reserves Operating LP

Application of Legacy Reserves Operating LP to Amend Order No. R-22392, Lea County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-22392, issued on November 17, 2022, to extend the well commencement deadline one year, to November 17, 2024. Order No. R-22392 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W½E½ of Section 15 and W½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF LEGACY RESERVES
OPERATING LP TO AMEND ORDER NO. R-22394,
LEA COUNTY, NEW MEXICO**

Case No. _____
(Formerly Case 22231)

APPLICATION

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22394 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22394, entered on November 17, 2022, in Case No. 22231, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½E½ of Section 15 and E½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Ruby Fed Com 502H well.

2. Paragraph 19 of Order No. R-22394 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22394 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22394 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Ruby Fed Com 502H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22394 to November 17, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

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Attorney for
Legacy Reserves Operating LP

Application of Legacy Reserves Operating LP to Amend Order No. R-22394, Lea County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-22394, issued on November 17, 2022, to extend the well commencement deadline one year, to November 17, 2024. Order No. R-22394 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 15 and E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF LEGACY RESERVES OPERATING LP
TO AMEND ORDER NO. R-22392, LEA COUNTY, NEW MEXICO.**

CASE NOS. 23804
(Formerly Case 22230)

**APPLICATION OF LEGACY RESERVES OPERATING LP
TO AMEND ORDER NO. R-22394, LEA COUNTY, NEW MEXICO.**

CASE NOS. 23809
(Formerly Case 22231)

AFFIDAVIT OF TAYLOR THORESON

Taylor Thoreson, being first duly sworn upon oath, deposes and states as follows:

1. My name is Taylor Thoreson, and I am employed by Legacy Reserves Operating LP (“Legacy”) as a VP of Land and Business Development.

2. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my qualifications as an expert witness in petroleum land matters were accepted and made a matter of public record. I have several years of experience in petroleum land matters, and I have worked directly or in a supervisory role with the properties that are the subject of these matters.

3. I am submitting this affidavit in support of Legacy’s applications in the above-referenced cases pursuant to 19.15.4.12.(A)(1) NMAC.

4. I am familiar with the applications filed by Legacy in these consolidated cases and the status of the lands in the subject lands.

5. I do not expect any opposition to the presentation of this case by affidavit because the affected interest owners have been contacted regarding the amending of the subject order, and they have not objected or entered appearances.

6. Legacy seeks orders extending for an additional year the obligation to commence drilling under Division Orders R-22392 and R-22394, issued on November 17, 2022, in Case Nos. 22230 and 22231, respectively. These orders pooled all uncommitted interest owners in the Bone Spring formation underlying standard 320-acre horizontal spacing units in Sections 15 and 22, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico, as follows:

- Order R-22392 pooled the W½E½ of Section 15 and W½E½ of Section 22 and dedicated the 320-acre spacing unit to the proposed **Ruby Fed Com 501H Well** (API No. Pending); and
- Order R-22394 pooled the E½E½ of Section 15 and the E½E½ of Section 22 and dedicated the 320-acre spacing unit to the proposed **Ruby Fed Com 502H Well** (API No. Pending).

Each order requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.” The orders further provide that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

7. The subject orders are attached as Exhibits B-1 and B-2.

8. Good cause exists for Legacy’s extension of time to commence drilling to allow for Legacy to revise its development plan based on proximate well data. Legacy intends to drill the initial proposed wells for the spacing units approved by Division Orders R-22392 and R-22394, but an extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

9. Applicant therefore requests that the Division amend the existing orders to extend the time to commence drilling the proposed wells to November 17, 2024.

10. I provided the law firm of Beatty & Wozniak, P.C. with the names and addresses for the working interest owners that remain subject to these pooling orders and instructed that each owner be provided notice of the hearing in these matters.

11. The granting of these applications is in the best interest of conservation, the prevention of waste and the protection of correlative rights.

12. I hereby swear that to the best of my knowledge and belief, all of the matters set forth herein are true, correct, and accurate.

[Remainder of page left intentionally blank]

FURTHER AFFIANT SAYETH NOT.

Dated this 2nd day of October, 2023.

Taylor Thoreson
Taylor Thoreson
Legacy Reserves Operating LP

STATE OF COLORADO)
) ss.
CITY AND COUNTY OF DENVER)

The foregoing instrument was subscribed and sworn to before me this 2nd day of October, 2023, by Taylor Thoreson, VP of Land and Business Development for Legacy Reserves Operating LP.

Witness my hand and official seal.

My commission expires: 11-16-2025



Carl J. Messina III

**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF LEGACY RESERVES
OPERATING LP FOR A HORIZONTAL SPACING
UNIT AND COMPULSORY POOLING, LEA
COUNTY, NEW MEXICO**

Case No. _____

APPLICATION

Legacy Reserves Operating LP (“Legacy”) OGRID No. 294281 through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the W½E½ of Section 15 and W½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit.

In support of its Application, Legacy states the following:

1. Legacy is a working interest owner in the proposed horizontal spacing and proration unit (“HSU”) and has a right to drill a well thereon.
2. Legacy proposes and dedicates the Ruby Fed Com 501H Well as an initial well to the HSU.
3. Legacy proposes the Ruby Fed Com 501H Well, an oil well, to be horizontally drilled from a surface location in the NE¼NE¼ of Section 15, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SW¼SE¼ of Section 22, Township 19 South, Range 33 East, N.M.P.M.

4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the W $\frac{1}{2}$ E $\frac{1}{2}$ of Section 15 and the W $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Ruby Fed Com 501H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;

E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;

F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.



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Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order from the Division: (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the W $\frac{1}{2}$ E $\frac{1}{2}$ of Section 15 and W $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit. The proposed well to be dedicated to the horizontal spacing unit is the Ruby Fed Com 501H Well, an oil well, to be horizontally drilled from a surface location in the NE $\frac{1}{4}$ NE $\frac{1}{4}$ of Section 15, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of Section 22, Township 19 South, Range 33 East, N.M.P.M. The well is orthodox in location and the take points and lateral comply with Statewide Rules for setbacks; also to be considered will be the cost of drilling and completing the well and the allocation of the costs thereof; actual operating costs and charges for supervision; the designation of the Applicant as Operator of the well and unit; and a 200% charge for the risk involved in drilling and completing the well. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

**STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF LEGACY RESERVES
OPERATING LP FOR A HORIZONTAL SPACING
UNIT AND COMPULSORY POOLING, LEA
COUNTY, NEW MEXICO**

Case No. _____

APPLICATION

Legacy Reserves Operating LP (“Legacy”) OGRID No. 294281 through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the E½E½ of Section 15 and E½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit.

In support of its Application, Legacy states the following:

1. Legacy is a working interest owner in the proposed horizontal spacing and proration unit (“HSU”) and has a right to drill a well thereon.
2. Legacy proposes and dedicates the Ruby Fed Com 502H Well as an initial well to the HSU.
3. Legacy proposes the Ruby Fed Com 502H Well, an oil well, to be horizontally drilled from a surface location in the NW¼NE¼ of Section 15, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SE¼SE¼ of Section 22, Township 19 South, Range 33 East, N.M.P.M.

4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 15 and the E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Ruby Fed Com 502H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;

E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;

F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.



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Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order from the Division: (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 15 and E $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit. The proposed well to be dedicated to the horizontal spacing unit is the Ruby Fed Com 502H Well, an oil well, to be horizontally drilled from a surface location in the NW $\frac{1}{4}$ NE $\frac{1}{4}$ of Section 15, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SE $\frac{1}{4}$ SE $\frac{1}{4}$ of Section 22, Township 19 South, Range 33 East, N.M.P.M. The well is orthodox in location and the take points and lateral comply with Statewide Rules for setbacks; also to be considered will be the cost of drilling and completing the well and the allocation of the costs thereof; actual operating costs and charges for supervision; the designation of the Applicant as Operator of the well and unit; and a 200% charge for the risk involved in drilling and completing the well. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

**STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**IN THE MATTER OF APPLICATION FOR
COMPULSORY POOLING SUBMITTED BY
LEGACY RESERVES OPERATING LP**

**CASE NO. 22230
ORDER NO. R-22392**

ORDER

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on August 18, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

FINDINGS OF FACT

1. Legacy Reserves Operating LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

CONCLUSIONS OF LAW

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

ORDER

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

- well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."
24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
 25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
 26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
 27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
 28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
 29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share

of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL
DIRECTOR

AES/jag

Date: 11/17/2022

Exhibit A

Received by OCD: 8/11/2022 3:28:55 PM

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COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 22230 (Ruby 501H)	APPLICANT'S RESPONSE
Date: 8/11/2022	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; PBEX, LLC and EGL Resources, Inc.; Earthstone Permian LLC and Earthstone Operating, LLC, EOA; Faskin Oil & Ranch, Ltd., EOA
Well Family	
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Tonto; Bone Spring, East [59475]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	W/2E/2 of Sections 15 and 22, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Oil Conservation Division Hearing - August 18, 2022
Case Nos. 22230 & 22231
Legacy Reserves Operating LP - Exhibit A

Released to Imaging: 8/11/2022 3:32:03 PM

Well #1	Ruby Fed Com 501H Well (API No. Pending) SHL: NE/4NE/4 (Lot A) of Section 15, Township 19 South, Range 33 East, N.M.P.M. BHL: SW/4SE/4 (Lot O) of Section 22, Township 19 South, Range 33 East, N.M.P.M. Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard
Well #2	
Horizontal Well First and Last Take Points	Exhibit C-2
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit C
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibits B and E
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibits C-2, C-3, and C-4
Tract List (including lease numbers and owners)	Exhibits C-2, C-3, and C-4
Pooled Parties (including ownership type)	Exhibits C-3 and C-4
Unlocatable Parties to be Pooled	Exhibits C-3 and C-4
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit C-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6
Cost Estimate to Drill and Complete	Exhibit C-6
Cost Estimate to Equip Well	Exhibit C-6
Cost Estimate for Production Facilities	Exhibit C-6

Oil Conservation Division Hearing - August 18, 2022
Case Nos. 22230 & 22231
Legacy Reserves Operating LP - Exhibit A

Geology	
Summary (including special considerations)	Exhibit D
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2
Well Orientation (with rationale)	Exhibit D
Target Formation	Exhibit D
HSU Cross Section	Exhibit D-2
Depth Severance Discussion	N/A
Geology Conclusions	Exhibit D-4
Forms, Figures and Tables	
C-102	Exhibit C-2
Tracts	Exhibit C-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-3 and C-4
General Location Map (including basin)	Exhibit C-1
Well Bore Location Map	Exhibit C-2, D-1, and D-2
Structure Contour Map - Subsea Depth	Exhibit D-2
Cross Section Location Map (including wells)	Exhibit D-1
Cross Section (including Landing Zone)	Exhibit D-3
Additional Information	
Special Provisions/Stipulations	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	James P. Barrett
Signed Name (Attorney or Party Representative):	
Date:	August 11, 2022

Oil Conservation Division Hearing - August 18, 2022
 Case Nos. 22230 & 22231
 Legacy Reserves Operating LP - Exhibit A

**STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**IN THE MATTER OF APPLICATION FOR
COMPULSORY POOLING SUBMITTED BY
LEGACY RESERVES OPERATING LP**

**CASE NO. 22231
ORDER NO. R-22394**

ORDER

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on August 18, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

FINDINGS OF FACT

1. Legacy Reserves Operating LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

CONCLUSIONS OF LAW

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

ORDER

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

- well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."
24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
 25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
 26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
 27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
 28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
 29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share

of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL
DIRECTOR

AES/jag

Date: 11/17/2022

Exhibit A

Received by OCD: 8/11/2022 3:28:55 PM

Page 8 of 155

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 22231 (RUBY 502H)	APPLICANT'S RESPONSE
Date: 8/11/2022	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; PBEX, LLC and EGL Resources, Inc.; Earthstone Permian LLC and Earthstone Operating, LLC, EOA; Faskin Oil & Ranch, Ltd., EOA
Well Family	
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Tonto; Bone Spring, East [59475]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	E/2E/2 of Sections 15 and 22, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), if No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Oil Conservation Division Hearing - August 18, 2022
 Case Nos. 22230 & 22231
 Legacy Reserves Operating LP - Exhibit A

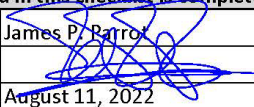
Released to Imaging: 8/11/2022 3:32:03 PM

Well #1	Ruby Fed Com 502H Well (API No. Pending) SHL: NE/4NE/4 (Lot A) of Section 15, Township 19 South, Range 33 East, N.M.P.M. BHL: SE/4SE/4 (Lot P) of Section 22, Township 19 South, Range 33 East, N.M.P.M. Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard
Well #2	
Horizontal Well First and Last Take Points	Exhibit C-2
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit C
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibits B and E
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibits C-2, C-3, and C-4
Tract List (including lease numbers and owners)	Exhibits C-2, C-3, and C-4
Pooled Parties (including ownership type)	Exhibits C-3 and C-4
Unlocatable Parties to be Pooled	Exhibits C-3 and C-4
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit C-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6
Cost Estimate to Drill and Complete	Exhibit C-6

Oil Conservation Division Hearing - August 18, 2022
Case Nos. 22230 & 22231
Legacy Reserves Operating LP - Exhibit A

Received by OCD: 8/11/2022 3:28:55 PM

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Cost Estimate to Equip Well	Exhibit C-6
Cost Estimate for Production Facilities	Exhibit C-6
Geology	
Summary (including special considerations)	Exhibit D
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2
Well Orientation (with rationale)	Exhibit D
Target Formation	Exhibit D
HSU Cross Section	Exhibit D-2
Depth Severance Discussion	N/A
Geology Conclusions	Exhibit D-4
Forms, Figures and Tables	
C-102	Exhibit C-2
Tracts	Exhibit C-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-3 and C-4
General Location Map (including basin)	Exhibit C-1
Well Bore Location Map	Exhibit C-2, D-1, and D-2
Structure Contour Map - Subsea Depth	Exhibit D-2
Cross Section Location Map (including wells)	Exhibit D-1
Cross Section (including Landing Zone)	Exhibit D-3
Additional Information	
Special Provisions/Stipulations	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	James P. Parrot
Signed Name (Attorney or Party Representative):	
Date:	August 11, 2022

Oil Conservation Division Hearing - August 18, 2022
 Case Nos. 22230 & 22231
 Legacy Reserves Operating LP - Exhibit A

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STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

APPLICATION OF LEGACY RESERVES OPERATING LP
TO AMEND ORDER NO. R-22392, LEA COUNTY, NEW MEXICO.

CASE NOS. 23804
(Formerly Case 22230)

APPLICATION OF LEGACY RESERVES OPERATING LP
TO AMEND ORDER NO. R-22394, LEA COUNTY, NEW MEXICO.

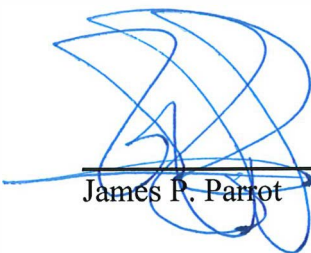
CASE NOS. 23809
(Formerly Case 22231)

AFFIDAVIT

STATE OF COLORADO)
) ss.
CITY AND COUNTY OF DENVER)

James P. Parrot, attorney in fact and authorized representative of Legacy Reserves Operating LP, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Applications has been provided under Notice Letters dated September 15, 2023, which the Applicant mailed via U.S. Postal Service Certified Mail. Notice was delivered on or around September 20, 2023, as shown on certified mail receipts attached as Exhibit C.

Applicant also published notice of the Applications in the Hobbs News-Sun on September 21, 2023. Proofs of publication are shown on Exhibit D.


James P. Parrot

SUBSCRIBED AND SWORN to before me on October 3, 2023 by James P. Parrot.

My commission expires:

TERESA L. PETERSON
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 19894002026
MY COMMISSION EXPIRES OCTOBER 4, 2025


NOTARY PUBLIC

September 15, 2023

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22392 to allow an additional year to commence drilling obligations
Ruby Fed Com 501H Well (Case No. 23804)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP (“Legacy”) has filed the enclosed application, Case No. 23804, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Ruby Fed Com 501H Well.

In Case No. 23804, Legacy seeks to amend Division Order No. R-22392, entered on November 17, 2022, in Case No. 22230, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W½E½ of Section 15 and W½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Ruby Fed Com 501H well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division’s website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division’s Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division’s website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

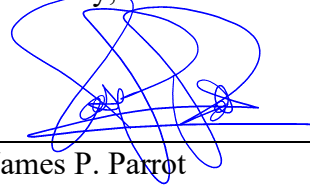
You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B NMAC to file a Prehearing Statement at least four business days in advance of a scheduled hearing, but in no

event later than 5 p.m. mountain time on the Thursday preceding the scheduled hearing date. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: The names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at cmessina@revenirenergy.com.

Sincerely,



James P. Parrot

Attorney for Legacy Reserves Operating LP

September 15, 2023

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22394 to allow an additional year to commence drilling obligations
Ruby Fed Com 502H Wells (Case No. 23809)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP (“Legacy”) has filed the enclosed application, Case No. 23809, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Ruby Fed Com 502H Well.

In Case No. 23809, Legacy seeks to amend Division Order No. R-22394, entered on November 17, 2022, in Case No. 22231, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½E½ of Section 15 and E½E½ of Section 22, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico, and dedicated the unit to the proposed Ruby Fed Com 502H well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division’s website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division’s Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division’s website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

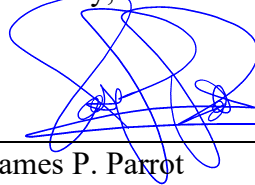
You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at cmessina@revenirenergy.com.

Sincerely,



James P. Parrot

Attorney for Legacy Reserves Operating LP

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-54

Ball Oil & Gas LLC
PO Box 1401
Roswell, NM 88202



9590 9402 8150 3030 9989 87

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5297 03

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation™
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage \$ _____

Sent To _____

Street and Apt. Ball Oil & Gas LLC
PO Box 1401
City, State, ZIP+4 Roswell, NM 88202

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-54

COG Operating LLC
600 W. Illinois Ave.
Midland, TX 79701



9590 9402 8150 3030 9992 74

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5296 11

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation™
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. COG Operating LLC
600 W. Illinois Ave.
City, State, ZIP+4 Midland, TX 79701

PS Form 3800 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-54

Daniel Brady, Trustee of the
Daniel Brady Living Trust
518 Pier Ave. #7
Santa Monica, CA 90405



9590 9402 8150 3030 9990 45

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5295 36

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation™
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
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Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No Daniel Brady, Trustee of the
Daniel Brady Living Trust
518 Pier Ave. #7
City, State, ZIP+4 Santa Monica, CA 90405

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> <i>Begins</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-54			9/18
Earthstone Permian, LLC 1400 Woodlock Forest Drive, Suite 300 Woodlands, Texas 77380		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)			
2. Article Number (Transfer from service label) 9589 0710 5270 0881 5295 43			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	Postmark Here
Postage \$ _____ Total Postage at _____ \$ _____ Sent To _____ Street and Apt. # _____ City, State, ZIP+4 _____	Earthstone Permian, LLC 1400 Woodlock Forest Drive, Suite 300 Woodlands, Texas 77380
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> <i>Bank</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-54			9/18/23
Fasken Land & Minerals Ltd. 6101 Holiday Hill Rd. Midland, TX 79707		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)			
2. Article Number (Transfer from service label) 9589 0710 5270 0881 5298 64			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	Postmark Here
Postage \$ _____ Total Postage at _____ \$ _____ Sent To _____ Street and Apt. # _____ City, State, ZIP+4 _____	Fasken Land & Minerals Ltd. 6101 Holiday Hill Rd. Midland, TX 79707
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> <i>Jay Reiser</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-54			9/18
Jay Reiser, Trustee of the Jay Reiser 2013 Trust 24110 Valle Del Oro Santa Clarita, CA 91321		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)			
2. Article Number (Transfer from service label) 9589 0710 5270 0881 5298 40			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	Postmark Here
Postage \$ _____ Total Postage at _____ \$ _____ Sent To _____ Street and Apt. # _____ City, State, ZIP+4 _____	Jay Reiser, Trustee of the Jay Reiser 2013 Trust 24110 Valle Del Oro Santa Clarita, CA 91321
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <i>Diane Tarratien</i> <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery <i>Diane Tarratien</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: McDaniels Family Trust 14801 North 12th Street Phoenix, Arizona 85022	2185-54 Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery Mail Restricted Delivery (over \$500)
Barcode: 9590 9402 8150 3030 9992 67 Article Number (Transfer from service label) 9589 0710 5270 0881 5296 59	PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt


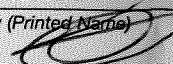
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage \$ Sent To Street and Apt. # City, State, ZIP+4	2185-54 McDaniels Family Trust 14801 North 12th Street Phoenix, Arizona 85022
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent X <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Nancy Seaton Living Trust 1834 East Cinnabar Phoenix, Arizona 85020	2185-54 Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery Mail Restricted Delivery (over \$500)
Barcode: 9590 9402 8150 3030 9989 70 Article Number (Transfer from service label) 9589 0710 5270 0881 5297 10	PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage \$ Sent To Street and Apt. # City, State, ZIP+4	2185-54 Nancy Seaton Living Trust 1834 East Cinnabar Phoenix, Arizona 85020
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	


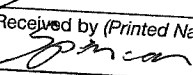
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent X <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery <i>[Signature]</i> 9/18/23 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Oxy USA WTP LP 5 Greenway Plaza, Suite 110 Houston, Texas 77046	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery Mail Restricted Delivery (over \$500)
Barcode: 9590 9402 8150 3030 9992 36 Article Number (Transfer from service label) 9589 0710 5270 0881 5296 28	PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage \$ Sent To Street and Apt. # City, State, ZIP+4	Oxy USA WTP LP 5 Greenway Plaza, Suite 110 Houston, Texas 77046 Case Nos. 23804 & 23809 Legacy Reserves Operating LP - Exhibit C
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p>1. Complete items 1, 2, and 3.</p> <p>2. Print your name and address on the reverse so that we can return the card to you.</p> <p>3. Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Patrick Brady & Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust 330 Cherry Hill Ct. Thousand Oaks, CA 91320</p> <p>2185-54</p> <p>9590 9402 8150 3030 9992 43</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5296 35</p>	<p>A. Signature</p> <p>X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p></p> <p>C. Date of Delivery</p> <p>9/18/23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
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For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	
Total Postage	2185-54
Sent To	Patrick Brady & Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust
Street and Apt.	330 Cherry Hill Ct.
City, State, ZIP+4	Thousand Oaks, CA 91320
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p>1. Complete items 1, 2, and 3.</p> <p>2. Print your name and address on the reverse so that we can return the card to you.</p> <p>3. Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Spencer Family Holdings, LLC 3379 S. Los Altos Street Millcreek, Utah 84109</p> <p>2185-54</p> <p>9590 9402 8150 3030 9992 50</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5296 42</p>	<p>A. Signature</p> <p>X  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p></p> <p>C. Date of Delivery</p> <p>9/18/23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	
Total Postage	2185-54
Sent To	Spencer Family Holdings, LLC
Street and Apt.	3379 S. Los Altos Street
City, State, ZIP+4	Millcreek, Utah 84109 Case Nos. 23804 & 23809
Legacy Reserves Operating LP - Exhibit C	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

9589 0710 5270 0881 5298 33

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Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage \$	2185-54
Sent To Street and Apt. Legacy Reserves Operating LP 15 Smith Road, Suite 3000 Midland, TX 79705 City, State, ZIP+4	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 5295 29

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OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage \$	2185-54
Sent To Street and Apt. Erin Brady, Trustee of the Erin Brady Living Trust 4629 Clybourn Ave. Toluca Lake, CA 91602 City, State, ZIP+4	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 5296 80

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Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage \$	2185-54
Sent To Street and Apt. Nortex Corporation 1415 Louisiana Street Houston, TX 77002 City, State, ZIP+4	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 5296 66

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OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage \$	2185-54
Sent To Street and Apt. Occidental Permian Limited Partnership 5 Greenway Plaza, Suite 110 Houston, Texas 77046 City, State, ZIP+4	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 5296 97

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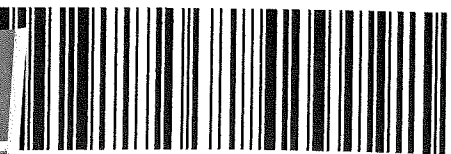
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage \$	2185-54
Sent To Street and Apt. Wills Royalty Inc. PO Box 1658 Carlsbad, NM 88221 City, State, ZIP+4	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

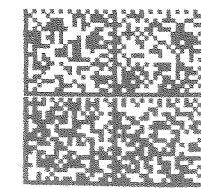
CERTIFIED MAIL

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1 0710 5270 0881 5298 26



FP US POSTAGE
\$009.49⁰
First-Class - iMI
ZIP 80202
09/15/2023
034A 0081801095

9589 0710 5270 0881 5298 26

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage a \$

Postmark Here

Sent To

Gross Family LP
210 Lea Ave. South
Roswell, NM 88201

2185-54

AMM

2185-54
9/15/2023

PS Form 3800, January 2020 PSN 7530-02-000-9053

2185-54

Gross Family LP
210 Lea Ave. South
Roswell, NM 88201

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gross Family LP
210 Lea Ave. South
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

2185-54



9590 9402 8150 3030 9994 58

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5298 26

J. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

NIXIE 731 40 1 0109/29/23

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 80202469250 2266N263182-00246

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Ball Oil & Gas LLC PO Box 1401 Roswell, NM 88202		B. Received by (Printed Name) C. Date of Delivery	
2185-55 9590 9402 8150 3030 9994 65 9589 0710 5270 0881 4351 65		D. Is delivery address different from item 1? If YES, enter delivery address below:	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery (over \$500)		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™		CERTIFIED MAIL® RECEIPT	
Domestic Mail Only		For delivery information, visit our website at www.usps.com	
OFFICIAL USE			
Certified Mail Fee		Postmark Here	
Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage		Total Postage and	
Sent To		Ball Oil & Gas LLC	
Street and Apt. #		PO Box 1401	
City, State, ZIP+4		Roswell, NM 88202	
PS Form 3800, January 2023 PSN 7530-02-000-9047		See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: COG Operating LLC 600 W. Illinois Ave. Midland, TX 79701		B. Received by (Printed Name) C. Date of Delivery	
2185-55 9590 9402 8150 3030 9994 89 9589 0710 5270 0881 4351 58		D. Is delivery address different from item 1? If YES, enter delivery address below:	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	


U.S. Postal Service™		CERTIFIED MAIL® RECEIPT	
Domestic Mail Only		For delivery information, visit our website at www.usps.com	
OFFICIAL USE			
Certified Mail Fee		Postmark Here	
Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage		Total Postage and	
Sent To		COG Operating LLC	
Street and Apt. #		600 W. Illinois Ave.	
City, State, ZIP+4		Midland, TX 79701	
PS Form 3800, January 2023 PSN 7530-02-000-9047		See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Daniel Brady, Trustee of the Daniel Brady Living Trust 518 Pier Ave. #7 Santa Monica, CA 90405		B. Received by (Printed Name) C. Date of Delivery	
2185-55 9590 9402 8150 3030 9994 72 9589 0710 5270 0881 4351 89		D. Is delivery address different from item 1? If YES, enter delivery address below:	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	


U.S. Postal Service™		CERTIFIED MAIL® RECEIPT	
Domestic Mail Only		For delivery information, visit our website at www.usps.com	
OFFICIAL USE			
Certified Mail Fee		Postmark Here	
Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage		Total Postage and	
Sent To		Erin Brady, Trustee of the Erin Brady Living Trust	
Street and Apt. #		4629 Clybourn Ave.	
City, State, ZIP+4		Toluca Lake, CA 91602	
PS Form 3800, January 2023 PSN 7530-02-000-9047		See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Amk</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-55			9/18/23
Fasken Land & Minerals Ltd. 6101 Holiday Hill Rd. Midland, TX 79707		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
 9590 9402 8150 3030 9993 80		3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Collect on Delivery Restricted Delivery	
2. Article Number (Transfer from service label)		all Mail Restricted Delivery (0)	
9589 0710 5270 0881 5297 96			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
Postage	
Total Postage \$	2185-55
Sent To	Fasken Land & Minerals Ltd.
Street and Apt. #	6101 Holiday Hill Rd.
City, State, ZIP+4	Midland, TX 79707
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Jay Reiser</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-55			9/18
Jay Reiser, Trustee of the Jay Reiser 2013 Trust 24110 Valle Del Oro Santa Clarita, CA 91321		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
 9590 9402 8150 3030 9994 03		3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Collect on Delivery Restricted Delivery	
2. Article Number (Transfer from service label)		all Mail Restricted Delivery (500)	
9589 0710 5270 0881 5298 19			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
Postage	
Total Postage \$	2185-55
Sent To	Jay Reiser, Trustee of the
Street and Apt. #	Jay Reiser 2013 Trust
City, State, ZIP+4	24110 Valle Del Oro Santa Clarita, CA 91321
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <i>Diane Ignatow</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
2185-55		Diane Ignatow	
McDaniels Family Trust 14801 North 12th Street Phoenix, Arizona 85022		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
 9590 9402 8150 3030 9993 11		3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Collect on Delivery Restricted Delivery	
2. Article Number (Transfer from service label)		all Mail Restricted Delivery	
9589 0710 5270 0881 5297 65			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
Postage	
Total Postage \$	2185-55
Sent To	McDaniels Family Trust
Street and Apt. #	14801 North 12th Street
City, State, ZIP+4	Phoenix, Arizona 85022
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: Nancy Seaton Living Trust 1834 East Cinnabar Phoenix, Arizona 85020		2185-55 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery I Mail I Mail Restricted Delivery (over 500)	
9590 9402 8150 3030 9993 28 9589 0710 5270 0881 5297 41		Domestic Return Receipt	
PS Form 3811, July 2020 PSN 7530-02-000-9053			

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage and \$ Sent To Street and Apt. # City, State, ZIP+4	2185-55 Nancy Seaton Living Trust 1834 East Cinnabar Phoenix, Arizona 85020
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: Patrick Brady & Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust 330 Cherry Hill Ct. Thousand Oaks, CA 91320		2185-55 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery I Mail I Mail Restricted Delivery (over 500)	
2. Article Number (Transfer from service label) 9590 9402 8150 3030 9993 42 9589 0710 5270 0881 5297 34		Domestic Return Receipt	
PS Form 3811, July 2020 PSN 7530-02-000-9053			

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage and \$ Sent To Street and Apt. # City, State, ZIP+4	2185-55 Patrick Brady & Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust 330 Cherry Hill Ct. Thousand Oaks, CA 91320
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
1. Article Addressed to: Spencer Family Holdings, LLC 3379 S. Los Altos Street Millcreek, Utah 84109		2185-55 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery I Mail I Mail Restricted Delivery (over 500)	
2. Article Number (Transfer from service label) 9590 9402 8150 3030 9993 35 9589 0710 5270 0881 5297 27		Restricted Delivery Domestic Return Receipt	
PS Form 3811, July 2020 PSN 7530-02-000-9053			

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OFFICIAL USE	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	Postmark Here
Postage \$ Total Postage and \$ Sent To Street and Apt. # City, State, ZIP+4	2185-55 Spencer Family Holdings, LLC 3379 S. Los Altos Street Millcreek, Utah 84109 Case Nos. 23804 & 23809. Legacy Reserves Operating LP - Exhibit A
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

9589 0710 5270 0881 5297 72

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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____ 2185-55

Street and Apt. # _____
 City, State, ZIP+4 _____
Nortex Corporation
1415 Louisiana Street
Houston, TX 77002

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 5296 02

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Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____ 2185-55

Street and Apt. # _____
 City, State, ZIP+4 _____
Legacy Reserves Operating LP
15 Smith Road, Suite 3000
Midland, TX 79705

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0881 4351 89

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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____ 2185-55

Street and Apt. # _____
 City, State, ZIP+4 _____
Daniel Brady, Trustee of the
Daniel Brady Living Trust
518 Pier Ave. #7
Santa Monica, CA 90405

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____ 2185-55

Street and Apt. # _____
 City, State, ZIP+4 _____
Wills Royalty Inc.
PO Box 1658
Carlsbad, NM 88221

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

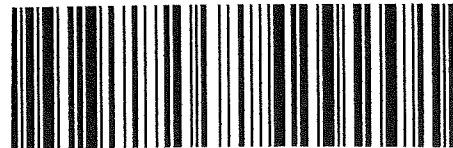
CERTIFIED MAIL

CERTIFIED MAIL® RECEIPT

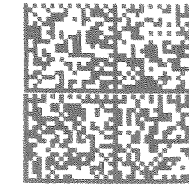
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9589 0710 5270 0881 5297 58



US POSTAGE \$009.49 First-Class - IMI ZIP 80202 09/15/2023 034A 0081801095

9589 0710 5270 0881 5297 58

Extra Services & Fees (check box, add fee as appropriate) Return Receipt (hardcopy) Return Receipt (electronic) Certified Mail Restricted Delivery Adult Signature Required Adult Signature Restricted Delivery

Postmark Here

Postage Total Postage air 2185-55

Sent To Gross Family LP 210 Lea Ave. South Roswell, NM 88201

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

AMM

2185-55 9/15/2023

2185-55

Gross Family LP 210 Lea Ave. South Roswell, NM 88201

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1?

2185-55

Gross Family LP 210 Lea Ave. South Roswell, NM 88201



9590 9402 8150 3030 9993 97

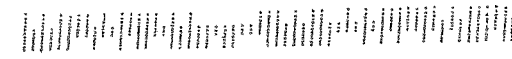
2. Article Number (Transfer from service label) 9589 0710 5270 0881 5297 58

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

NIXIE 731 SE 1 0109/20/23

RETURN TO SENDER ATTEMPTED - NOT KNOWN UNABLE TO FORWARD

RC1 RAB2160000



Case Nos. 23804 & 23809 Legacy Reserves Operating LP - Exhibit C

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
September 21, 2023
and ending with the issue dated
September 21, 2023.



Publisher

Sworn and subscribed to before me this
21st day of September 2023.



Business Manager

My commission expires

January 29, 2027
STATE OF NEW MEXICO
(Seal) **NOTARY PUBLIC**
GUSSIE RUTH BLACK
COMMISSION # 1087528
COMMISSION EXPIRES 01/29/2027

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said publication has been made.

LEGAL NOTICE
September 21, 2023

STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION, SANTA FE, NEW MEXICO

The State of New Mexico, Energy Minerals and Natural Resources Department, Oil Conservation Division ("Division") hereby gives notice that the Division will hold public hearings before a hearing examiner on the following cases. Hearings will be conducted remotely. The hearing will be conducted on **Thursday, October 5, 2023, beginning at 8:15 A.M.** To participate in the electronic hearing, see the instructions posted below. The docket may be viewed at <http://www.emnrd.state.nm.us/OCD/hearings/info/> or obtained from Marlene Salvarez at Marlene.Salvarez@state.nm.us. Documents filed in the case may be viewed at <https://ocoinmaged.emnrd.state.nm.us/magimg/CaseFileCriteria.aspx>. If you are an individual with a disability who needs a reader, amplifier, qualified sign language interpreter, or other form of auxiliary aid or service to attend or participate in the hearing, contact Marlene Salvarez at Marlene.Salvarez@state.nm.us, or the New Mexico Relay Network at 1-800-659-1779, no later than **September 25, 2023**.

STATE OF NEW MEXICO TO:
All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

TO: All overriding royalty interest owners and pooled parties, including: Ball Oil & Gas LLC, COG Operating LLC, Daniel Brady, Trustee of the Daniel Brady Living Trust, Earthstone Permian, LLC, Erin Brady, Trustee of the Erin Brady Living Trust, Fasken Land & Minerals Ltd., Gross Family LP, Jay Reiser, Trustee of the Jay Reiser 2013 Trust, Legacy Reserves Operating LP, McDaniels Family Trust, Nancy Seaton Living Trust, Nortex Corporation, Occidental Permian Limited Partnership, Oxy USA WTP LP, Patrick Brady and Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust, Spencer Family Holdings, LLC, and Wills Royalty Inc.

CASE NO. 23804: Application of Legacy Reserves Operating LP to Amend Order No. R- 22392, Lea County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-22392, issued on November 17, 2022, in Case No. 22230, to extend the well commencement deadline one year, to November 17, 2024. Order No. R-22392 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W1/2E1/2 of Section 15 and W1/2E1/2 of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico. #00282975

67112105

00282975

MARY FINNEY
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Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
September 21, 2023
and ending with the issue dated
September 21, 2023.



Publisher

Sworn and subscribed to before me this
21st day of September 2023.



Business Manager

My commission expires
January 29, 2027

(Seal) STATE OF NEW MEXICO
NOTARY PUBLIC
GUSSIE RUTH BLACK
COMMISSION # 1087526
COMMISSION EXPIRES 01/29/2027

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said publication has been made.

LEGAL NOTICE
September 21, 2023

STATE OF NEW MEXICO
ENERGY, MINERALS, AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION, SANTA FE, NEW MEXICO

The State of New Mexico, Energy Minerals and Natural Resources Department, Oil Conservation Division ("Division") hereby gives notice that the Division will hold public hearings before a hearing examiner on the following cases. Hearings will be conducted remotely. The hearing will be conducted on **Thursday, October 5, 2023, beginning at 8:15 A.M.** To participate in the electronic hearing, see the instructions posted below. The docket may be viewed at <http://www.emnrd.state.nm.us/QCD/hearings-info/> or obtained from Marlene Salvidrez at Marlene.Salvidrez@state.nm.us. Documents filed in the case may be viewed at <https://ocdimage.emnrd.state.nm.us/imaging/CaseFileCriteria.aspx>. If you are an individual with a disability who needs a reader, amplifier, qualified sign language interpreter, or other form of auxiliary aid or service to attend or participate in the hearing, contact Marlene Salvidrez at Marlene.Salvidrez@state.nm.us, or the New Mexico Relay Network at 1-800-659-1779, no later than **September 25, 2023**.

STATE OF NEW MEXICO TO:

All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

TO: All overriding royalty interest owners and pooled parties, including: Ball Oil & Gas LLC, COG Operating LLC, Daniel Brady, Trustee of the Daniel Brady Living Trust, Erin Brady, Trustee of the Erin Brady Living Trust, Fasken Land & Minerals Ltd., Gross Family LP, Jay Reiser, Trustee of the Jay Reiser 2013 Trust, Legacy Reserves Operating LP, McDaniels Family Trust, Nancy Seaton Living Trust, Nortex Corporation, Patrick Brady and Kimberly Brady, Trustee of the Patrick Brady & Kimberly Brady Living Trust, Spencer Family Holdings, LLC, and Willis Royalty Inc.

CASE NO. 23809: Application of Legacy Reserves Operating LP to Amend Order No. R- 22394, Lea County, New Mexico. Applicant in the above-styled cause seeks an order amending Order No. R-22394, issued on November 17, 2022, in Case No. 22231, to extend the well commencement deadline one year, to November 17, 2024. Order No. R-22394 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E1/2E1/2 of Section 15 and E1/2E1/2 of Section 22, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico. #00282976

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