Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

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

5. Lease Serial No. LC-068474

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this t	orm for proposals to di Use Form 3160-3 (APD)	rill or to re-enter an		e or Tribe Name	
SUBMI	T IN TRIPLICATE – Other instr	7. If Unit of CA/Ag	7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well		0 0.00			
Oil Well Gas Well Other AUG 2 9 2014			8. Well Name and 1 DRICKEY QUE	8. Well Name and No. DRICKEY QUEEN SAND UNIT #23	
2. Name of Operator LEGACY RESERVES OPERATING LP			9. API Well No. 30-005-00972		
3a. Address PO BOX 10848 MIDLAND, TX 7970	Phone No. (in 120 14 150) 432-689-5200		10. Field and Pool or Exploratory Area CAPROCK; QUEEN		
4. Location of Well <i>(Footage, Sec., T.)</i> , 660 FSL & 660 FWL, UNIT LETTER M, SE			11. County or Parish, State CHAVES CO., NM		
12. CHEC	K THE APPROPRIATE BOX(ES	S) TO INDICATE NATURE	OF NOTICE, REPORT OR OT	THER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen . Fracture Treat New Construction Plug and Abandon Plug Back	Production (Start/Resume) Reclamation Recomplete Temporarily Abandon Water Disposal	Water Shut-Off Well Integrity Other Change of Operator	
Attach the Bond under which the v following completion of the involve	ally or recomplete horizontally, giver will be performed or provide ed operations. If the operation res Abandonment Notices must be filed final inspection.) II, LP transferred operations to able terms, conditions, stipulations.	ve subsurface locations and the Bond No. on file with B sults in a multiple completio ed only after all requirement b Legacy Reserves Opera ons and restrictions conce	measured and true vertical depth LM/BIA. Required subsequent n or recompletion in a new inters, including reclamation, have be ting LP.	s of all pertinent markers and zones. reports must be filed within 30 days val, a Form 3160-4 must be filed once completed and the operator has	
14. I hereby certify that the foregoing is t	rue and correct. Name (Printed/Type	ed)			
GREGG SKELTON		Title OPERAT	TIONS MANAGER	1/1/	
Signature Hear	h	Date 08/18/20	14	P	
	THIS SPACE FOR	R FEDERAL OR ST.	ATE OFFICE USE		
Approved by	/S/ Angel Mayes		eld Manager,	AUG 81 2014	
Conditions of approval, if any, are attached that the applicant holds legal or equitable tentitle the applicant to conduct operations	itle to those rights in the subject leas	varrant of Certify And n	Roswell Field Office		

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

