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Form 3160-5UNITED STATESN.M. UR. CONSERVA(March 2012)DEPARTMENT OF THE INTERIOR811 S. FIRST SBUREAU OF LAND MANAGEMENTARTESIA, N					FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014	
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7. If Unit of CA/Agr	eement, Name and/or No.	
1. Type of Well Oil Well Gas Well Other					8. Well Name and No. Chaves A Federal #2	
2. Name of Operator Legacy Reserves Operating LP				9. API Well No. 30-005-61512	9. API Well No. 30-005-61512	
3a. Address 3b. Phone PO Box 10848, Midland, TX 79702 432-6			clude area code)10. Field and Pool or Exploratory Area0Pecos Slope; ABO (Gas)			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish, State			
660' FSL & 760' FEL, Unit Letter P, Sec. 17, T-7-S, R-26-E				Chaves Co., N	Chaves Co., NM	
12. CHI	ECK THE APPROPRIATE BO)X(ES) TO INDICATI	E NATURE OF NO	DTICE, REPORT OR OTI	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acidize Deepen Alter Casing Fracture Casing Repair New Cor Change Plans Plug and		eat I F	Production (Start/Resume) Water Shut-Off Reclamation Well Integrity Recomplete ✓ Other Change of Operator Temporarily Abandon		
Final Abandonment Notice	Convert to Injection	Plug Back	v 🗖	Water Disposal		
following completion of the invo testing has been completed. Fina determined that the site is ready	lved operations. If the operati al Abandonment Notices must for final inspection.)	ion results in a multiple be filed only after all r	e completion or rec equirements, includ	ompletion in a new intervaling reclamation, have bee	eports must be filed within 30 days al, a Form 3160-4 must be filed once en completed and the operator has	
Effective 01/01/2013 COG Ope The undersigned accepts all ap or portion thereof, as described	oplicable terms, conditions, l above.	stipulations and rest	rictions concernin	g operations on the lea		
Legacy Reserves Operating LP bond coverage pursuant to 43 CFR 3104 for lease activities is provid				rovided by BLM Bond N APR 122	1	
LOGA 4/5/13 cepted for record NMOCD				NMOCD AR		
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Ernie Hanson Ti			tle Operations Manager			
Signature ERme	HAm	Date	Date 01/01/2013			
·	THIS SPACE	FOR FEDERAL	OR STATE (OFFICE USE	, <u>, , , , , , , , , , , , , , , , , , </u>	
Approved by /S/ DAVID R. GLASS				UM ENGINEER	APR 10 2013	
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify			Office ROSWHLL 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.