Form 3160-5 (March 2012)

(Instructions on page 2)

# UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

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

5. Lease Serial No. NMNM117117

6. If Indian, Allottee or Tribe Name

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

abandoned well.	Use Form 3160-3 (AP	D) for such	proposal	s.			
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well					- 		
☑ Oil Well ☐ Gas Well ☐ Other					Well Name and No.     Moose 23 Federal #1Y		
2. Name of Operator Legacy Reserves Operating LP					9. API Well No. 30-015-35755		
3a. Address 3b. Phone No. (include area code)					10. Field and Pool or Exploratory Area		
PO Box 10848, Midland, TX 79702 432-689-5200					Crow Flats; Wolfcamp		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)					11. County or Parish, State		
1665' FSL & 1026' FWL, Unit Letter L, Sec.					Eddy Co., NM		
12. CHEC	CK THE APPROPRIATE BOX	(ES) TO INDICA	ATE NATUR	E OF NOTIO	CE, REPORT OR OTHE	R DATA	
TYPE OF SUBMISSION			TY	PE OF ACT	TON		
Notice of Intent	Acidize	Deepen		Prod	uction (Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture		=	amation		I Integrity
Subsequent Report	Casing Repair		struction	=	omplete	Oth	Change of Operator
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Plug Bac	Abandon		porarily Abandon er Disposal	-	
13. Describe Proposed or Completed O							winests duration thorough IF
determined that the site is ready fo	•			_			6/26/13 priecord
Effective 01/01/2013 COG Operation The undersigned accepts all appropriate or portion thereof, as described a	licable terms, conditions, sti					NMOK land	טט
Legacy Reserves Operating LP		13 CFR 3104 fo	r lease activi	ities is prov	ided by BLM Bond No.	NMB000	394.
APPROVAL BY STATE			<b>5</b> 2013		SEE ATTACHED FOR CONDITIONS OF APPROVAL		
14. I hereby certify that the foregoing is t	rue and correct. Name (Printed)	NMOCD Typed)	ARTES	AL			<u> </u>
Ernie Hanson			Title Operations Manager				
Signature Amil	D	Date 01/01/2013					
	THIS SPACE F	OR FEDER	AL OR ST	ATE OF	FIGEUSEVEN		
Approved by /s/ Jerry Blakley			Tial.		HOVEL	7	
Conditions of approval, if any, are attached that the applicant holds legal or equitable to the applicant to conduct operations				JUN 2 0 2013	ate		
Title 18 U.S.C. Section 1001 and Title 43 fictitious or fraudulent statements or representations.	U.S.C. Section 1212, make it a cesentations as to any matter with	rime for any person	n knowingly a	nd Rijikiliyi	TOMAKENTO ANY DEPARTMENT TOMAKENTO ANY DEPARTMENT TOMAKENTO ANY DEPARTMENT	or agency	of the United States any false,

#### 6/21/2013 Approved subject to Conditions of Approval. Recent Bond review. JDB

### **Change of Operator**

## **Conditions of Approval**

### Legacy Reserves Operating LP.

- 1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
- 2. Submit for approval of water disposal method.
- 3. Submit updated facility diagrams as per Onshore Order #3
- 4. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
- 6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
- 7. Subject to like approval by NMOCD.
- 8. Submit plan for approval of well operations for all TA/SI wells within 90 days of this approval to change operator.
- 9. If a well is not capable of production in paying quantities submit Notice of Intent to P&A or submit documentation proving that well is capable of production in paying quantities within 90 days of approval of change of operator.