

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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.

5. Lease Serial No.
NM96248

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2. **HOBBS OCD**

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
LEGACY RESERVES OPERATING LP

3a. Address
PO BOX 10848
MIDLAND, TX 79702

3b. Phone No. (include area code)
432-689-5200

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
330' FNL & 1650' FEL, UNIT LETTER B, SEC 24, T9S, R35E

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.
BARNES FEDERAL #1

9. API Well No.
30-025-21759

10. Field and Pool or Exploratory Area
BOUGH; SAN ANDRES (GAS)

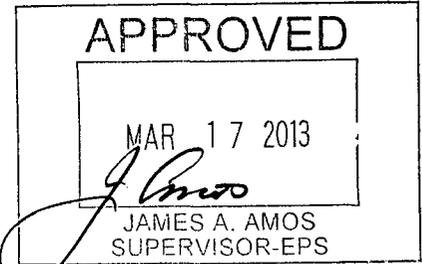
11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input checked="" type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomplate in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

FORMATION: ABO
 WATER PRODUCED: 1/4 bbl PER DAY
 STORED: 300 bbl TANK
 MOVED: TRUCKED
 DISPOSAL: RICHARDSON SWD
 LOCATION: 5-T14S-R36E
 PERMIT: 212



Accepted for Record Purposes.
Approval Subject to Onsite Inspection.

Date: 3-17-13

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
KEVIN BRACEY

Title OPERATIONS SUPERINTENDENT

Signature *KB*

Date 02/19/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title **Petroleum Engineer** Date **MAR 21 2013**

Office _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

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.

MAR 21 2013

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<p>1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator LEGACY RESERVES OPERATING LP</p> <p>3a. Address PO BOX 10848 MIDLAND, TX 79702</p> <p>3b. Phone No. (include area code) 432-689-5200</p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FNL & 1650' FEL, UNIT LETTER B, SEC 24, T9S, R35E</p>	<p>7. If Unit of CA/Agreement, Name and/or No.</p> <p>8. Well Name and No. BARNES FEDERAL #1</p> <p>9. API Well No. 30-025-21759</p> <p>10. Field and Pool or Exploratory Area BOUGH; SAN ANDRES (GAS)</p> <p>11. County or Parish, State LEA COUNTY, NM</p>
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<p>14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)</p> <p>KEVIN BRACEY</p>	<p>Title OPERATIONS SUPERINTENDENT</p>
<p>Signature </p>	<p>Date 02/19/2013</p>

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

<p>Approved by</p>	<p>Title</p>	<p>Date</p>
<p>Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.</p>	<p>Office </p>	

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**BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972**

Conditions of Approval

**Legacy Reserves Operating LP
Barnes Federal #1
Lease NM96248 3002521759**

S/11

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.