

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs
HOBBS OCD

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.

OCT 23 2013

SUBMIT IN TRIPLICATE - Other instructions on reverse side. RECEIVED

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMLC052956
2. Name of Operator LEGACY RESERVES OPERATING LPE-Mail: lpina@legacylp.com		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 10848 MIDLAND, TX 79702		7. If Unit or CA/Agreement, Name and/or No. NM70970A
3b. Phone No. (include area code) Ph: 432-689-5200		8. Well Name and No. LANGLIE JAL UNIT 45
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 5 T25S R37E SENE 1650FNL 330FEL		9. API Well No. 30-025-11461
		10. Field and Pool, or Exploratory LANGLIE MATTIX-7RVRS-Q-GB
		11. County or Parish, and State LEA COUNTY, NM

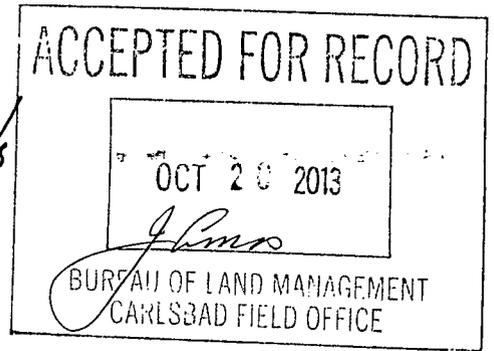
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
? <input 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 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 recomplete 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

09/12/13 - RUN MIT AND RETURN WELL TO INJECTION.

Supply copy of chart along w/ details



14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #219947 verified by the BLM Well Information System
For LEGACY RESERVES OPERATING LP, sent to the Hobbs
Committed to AFMSS for processing by JOHNNY DICKERSON on 09/18/2013 ()**

Name (Printed/Typed) LAURA PINA	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 09/12/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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.		Office _____

Title 18 U.S.C. Section 1001 and Title 42 U.S.C. Section 12122 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

OCT 24 2013