	994) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT NMOCD Hobbs			FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an				5. Lease Serial No.
				NMNM96851
abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPL	LICATE – Other inst	ructions on revers	se side	7. If Unit or CA/Agreement, Name and/or No
1. Type of Well HOBBS OCD Oil Well Gas Well Other Dry				8. Well Name and No. MORGAN FED. 1
2. Name Of Operator OCT 28 2015 LEGACY RECLAMATION PROJECT				9. API Well No. 3000520667
3a. Address		3b. Phone No. (include area code)		10. Field and Pool, or Exploratory Area
N/A		N/A		MANY GATES - MORROW
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SEC. 06, T. 10S., R. 30 E., NENW 990FNL, 1980FWL			-	11. County or Parish, State Chaves, NM
12. CHECK AP	PROPRIATE BOX(ES)			, REPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION			
Notice of Intent	Acidize	Deepen	Productio	n (Start/Resume) 🔲 Water Shut-Off
	Alter Casing	Fracture Treat	Reclamati	on Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomple	te Dther
Final Abandonment Notice	Change Plans Plug and Abandon Temporarily Abandon			
	Convert to Injection Plug Back Water Disposal			
thereof. If the proposal is to det and zones. Attach the Bond un within 30 days following compl shall be filed once testing has be the operator has determined that BLM WILL INTERNAL	epen directionally or recomplete nder which the work will be pe- letion of the involved operation een completed. Final Abandonr the site is ready for final inspec- LLY GENERATE A (I CTORILY COMPLET	e horizontally, give subsurfa rformed or provide the Bon is. If the operation results in ment Notices shall be filed of etion.) FAN) FOR APPRO	ce locations and me d No. on file with F a multiple complet ally after all requirem	date of any proposed work and approximate duration asured and true vertical depths of all pertinent markers 3LM/BIA. Required subsequent reports shall be filed tion or recompletion in a new interval, a Form 3160-4 ments, including reclamation, have been completed, and NO OPERATOR. DIRTWORK COVER IN TIME. WELL SHOULD
14. Liberabu certifu that the formers	ing is true and correct			
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) FORRSSY MAYER			Vatural,	Resource Specialist (BIM)
Signature	L'Allager_	Dat		
/ /	THIS SPACE F	OR FEDERAL OR S	TATE OFFICE	USE
Approved By CARuben J. Sanchez			Title Assistant	Field Manager, OCT 2 3 2015
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	OSWELL FIELD OFFICE
Title 18 U.S.C. Section 1001, makes fraudulent statements or representation			any department or a	agency of the United States any false, fictitious or
(Instructions on reverse)	Ac	mab OCD	0/28/2015 Only	DCT 9 9 9015 M

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DCT 9 9 9015

(Instructions on reverse)