

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Hobbs

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.

HOBBS OCD
JAN 08 2016
RECEIVED

- 5. Lease Serial No.
NMLC062486
- 6. If Indian, Allottee or Tribe Name
- 7. If Unit or CA/Agreement, Name and/or No.
8910063990

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. DRICKEY QUEEN SAND UNIT 813 ✓
2. Name of Operator LEGACY RESERVES OPERATING ✓ Contact: LAURA PINA E-Mail: lpina@legacyp.com	9. API Well No. 30-005-00982-00-S1 ✓
3a. Address PO BOX 10848 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-689-5200 Ext: 5273
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T14S R31E SWSE 990FSL 1650FEL 33.127615 N Lat, 103.823605 W Lon ✓	10. Field and Pool, or Exploratory CAPROCK-QUEEN
	11. County or Parish, and State CHAVES 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 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 checked="" 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 recompleat 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 recompleat 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.)

Haul off caliche, rip and restore location to natural contour landscape. Reseed during growing season.

ACCEPTED FOR RECORD
DEC 23 2015
NAME HCD

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

**Electronic Submission #326728 verified by the BLM Well Information System
For LEGACY RESERVES OPERATING, sent to the Roswell
Committed to AFMSS for processing by DAVID GLASS on 12/23/2015 (16DRG0043SE)**

Name (Printed/Typed) LAURA PINA	Title COMPLIANCE COORDINATOR
Signature (Electronic Submission)	Date 12/17/2015

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 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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Accepted for Record Only
MSSB/OCD 1/11/2016

JAN 12 2016

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Revisions to Operator-Submitted EC Data for Sundry Notice #326728

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	RECL NOI	RECL NOI
Lease:	NMLC062486	NMLC062486
Agreement:		8910063990 (NMNM70935X)
Operator:	LEGACY RESERVES OPERATING LP PO BOX 10848 MIDLAND, TX 79702 Ph: 432-689-5200	LEGACY RESERVES OPERATING PO BOX 10848 MIDLAND, TX 79702 Ph: 432-689-5200
Admin Contact:	LAURA PINA COMPLIANCE COORDINATOR E-Mail: lpina@legacylp.com Ph: 432-689-5200 Ext: 5273	LAURA PINA COMPLIANCE COORDINATOR E-Mail: lpina@legacylp.com Ph: 432-689-5200 Ext: 5273
Tech Contact:	LAURA PINA COMPLIANCE COORDINATOR E-Mail: lpina@legacylp.com Ph: 432-689-5200 Ext: 5273	LAURA PINA COMPLIANCE COORDINATOR E-Mail: lpina@legacylp.com Ph: 432-689-5200 Ext: 5273
Location:		
State:	NM	NM
County:	CHAVES	CHAVES
Field/Pool:	CAPROCK; QUEEN	CAPROCK-QUEEN
Well/Facility:	DRICKEY QUEEN SAND UNIT 813 Sec 4 T14S R31E SWSE 990FSL 1650FEL	DRICKEY QUEEN SAND UNIT 813 Sec 4 T14S R31E SWSE 990FSL 1650FEL 33.127615 N Lat, 103.823605 W Lon

Approved for Release Only