

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.  
NMNM84652

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well  
 Oil Well     Gas Well     Other WDW

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)  
SEC 7, T20S, R34E, NWNE, 660 FNL & 1980 FEL

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

8. Well Name and No.  
HAMON FEDERAL COM #1

9. API Well No.  
30-025-30848

10. Field and Pool or Exploratory Area  
QUAIL RIDGE; ATOKA

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 checked="" 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 checked="" type="checkbox"/> Other <u>CASING</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>INTEGRITY TEST</u>
	<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 must 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 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.)

Attached please find the casing integrity test as per #24 of COA dated 10/26/15, witnessed by BLM. MIT will follow.

HOBBS OCD

MAY 19 2016

RECEIVED

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

Title SENIOR ENGINEER

Signature *Stephen D. Owen*

Date 04/05/2016

ACCEPTED FOR RECORD

MAY 6 2016

*Dr. Swartz*

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

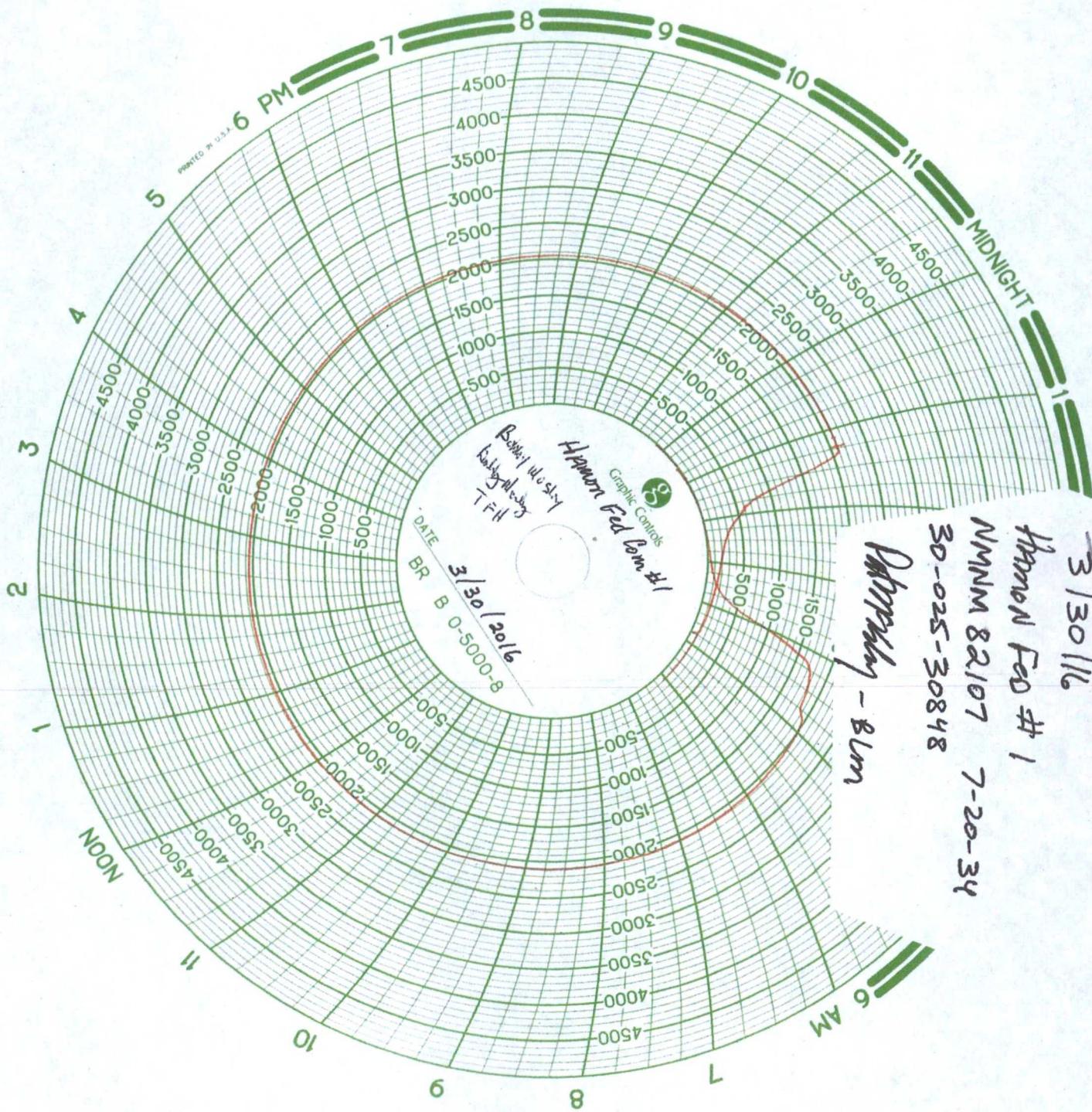
Approved by

Title

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.

*Ka*



Graphic Controls

Harmon Fed Com #1

DATE 3/30/2016

BR B 0-5000-8

Resistor 10k Ohm

Resistor 10k Ohm

T-F-R

3/30/16

Harmon Fed #1

NMNM 82107 7-20-34

30-025-30848

Atkinson - Blm