

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018



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
MAR 07 2017
RECEIVED

5. Lease Serial No.
NMNM129733

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

8. Well Name and No.
HAMON A FEDERAL COM 4H

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
LEGACY RESERVES OPERATING LP
Contact: D. PATRICK DARDEN, PE
E-Mail: pdarden@legacyp.com

9. API Well No.
30-025-41617

3a. Address
PO BOX 10848
MIDLAND, TX 79702

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

10. Field and Pool or Exploratory Area
TEAS EAST; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 6 T20S R34E SWSE 420FSL 1920FEL

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"/> Hydraulic Fracturing	<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 checked="" 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 recomple 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 recomple 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.

10/06/2014 Spud

10/09/2014 Set 1621' of 54# J-55 13 3/8" csg. Cmt csg w/1180sx. Circulated cmt to surface.

10/21/2014 Set 5395' of 40# J-55 & N-80 9 5/8" csg (DVT @ 3783', ECP @ 3809'). Cmt csg w/3790sx cmt. Circulated cmt to surface.

10/23/2014 to 11/13/2014 Rotate & slide drilled to TD @ 16,190' MD.

11/20/2014 Set 16,190' of 17# P-110 5 1/2" csg. Cmt csg w/3100sx. Circulated cmt to surface.

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

**Electronic Submission #368784 verified by the BLM Well Information System
For LEGACY RESERVES OPERATING LP, sent to the Hobbs**

Name (Printed/Typed) D. PATRICK DARDEN, PE

Title SR. ENGINEERING ADVISOR

Signature (Electronic Submission)

Date 03/03/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title

For Record Only

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

upon BLM Approval.

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.

(Instructions on page 2)

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

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