

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.*5. Lease Serial No.  
NMNM053434

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**

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@legacylp.com

8. Well Name and No.  
LEA UNIT 2

9. API Well No.

30-025-02428

3a. Address

303 W WALL ST STE 1800  
MIDLAND, TX 79701

3b. Phone No. (include area code)

Ph: 432-689-5200 Ext: 5237

10. Field and Pool or Exploratory Area  
LEA; DEVONIAN

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 12 T20S R34E SENW 1950FNL 1950FWL

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 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"/> 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 checked="" 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 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.

Legacy Reserves Operating, LP will be recompleting well uphole by opening additional pay in the Bone Spring formation on the Lea Unit #2. An earlier sundry notice requested permission to P&A the well. Legacy will be adding these pay zones (see attached Wellbore Diagrams) that will keep the well in a producing status. Please disregard the previous request to P&A the well.

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

**Electronic Submission #392073 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 10/16/2017

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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

**Accepted for Record Only**  
*Requiring 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 \*\***

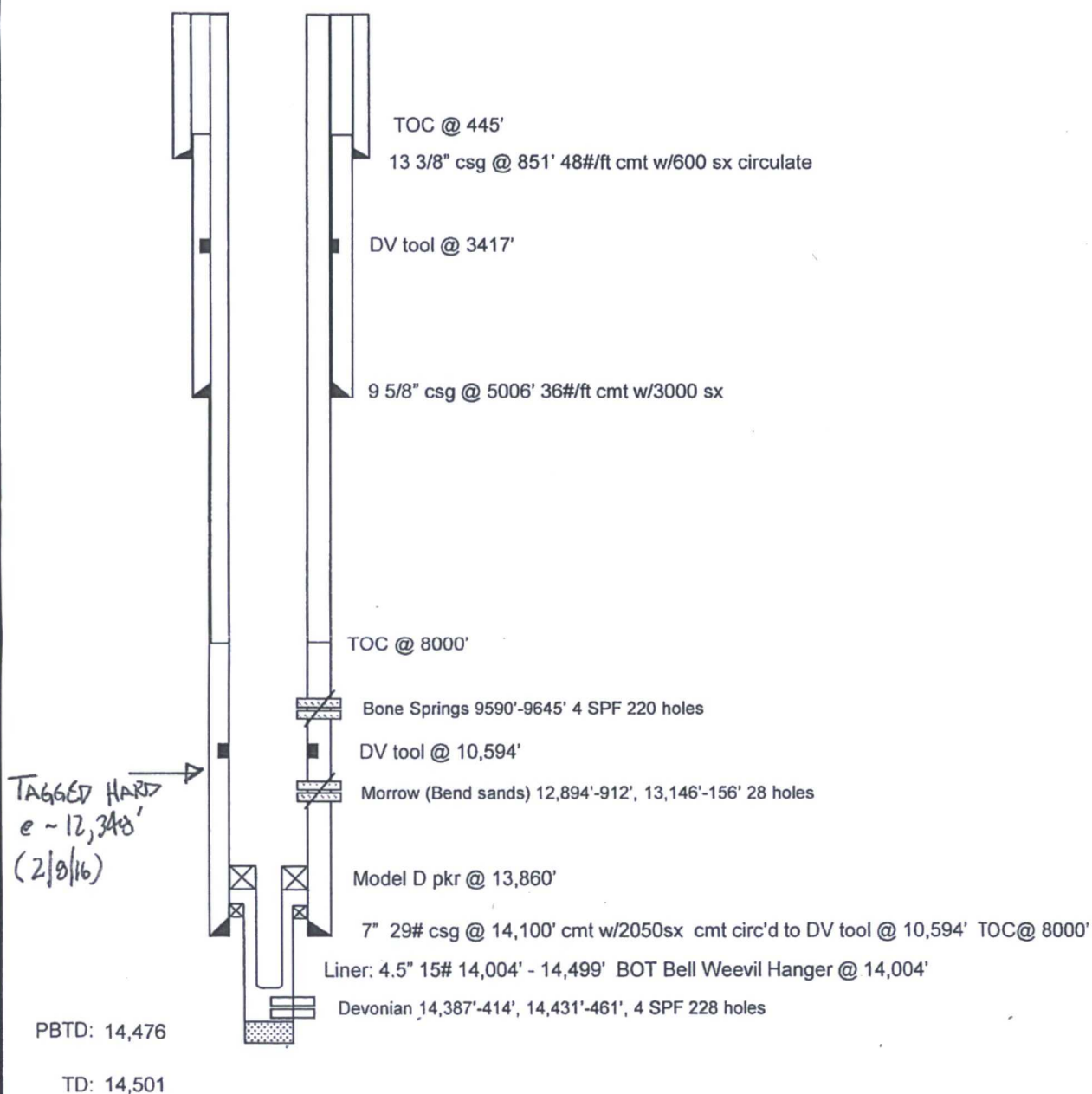
# CURRENT WELLBORE CONDITION.

FIELD: LEA  
LEASE: LEA UNIT  
COUNTY: LEA  
STATE: NEW MEXICO

GL: 3667  
KB: 3688  
SPUD DATE: 3/1961  
API No:

DATE: 3/27/2000  
BY: dp darden  
WELL: 2

LOCATION: 1950' FNL & 1950' FWL SEC 12, T20S, R34E



PROPOSED WELLBORE CONDITION

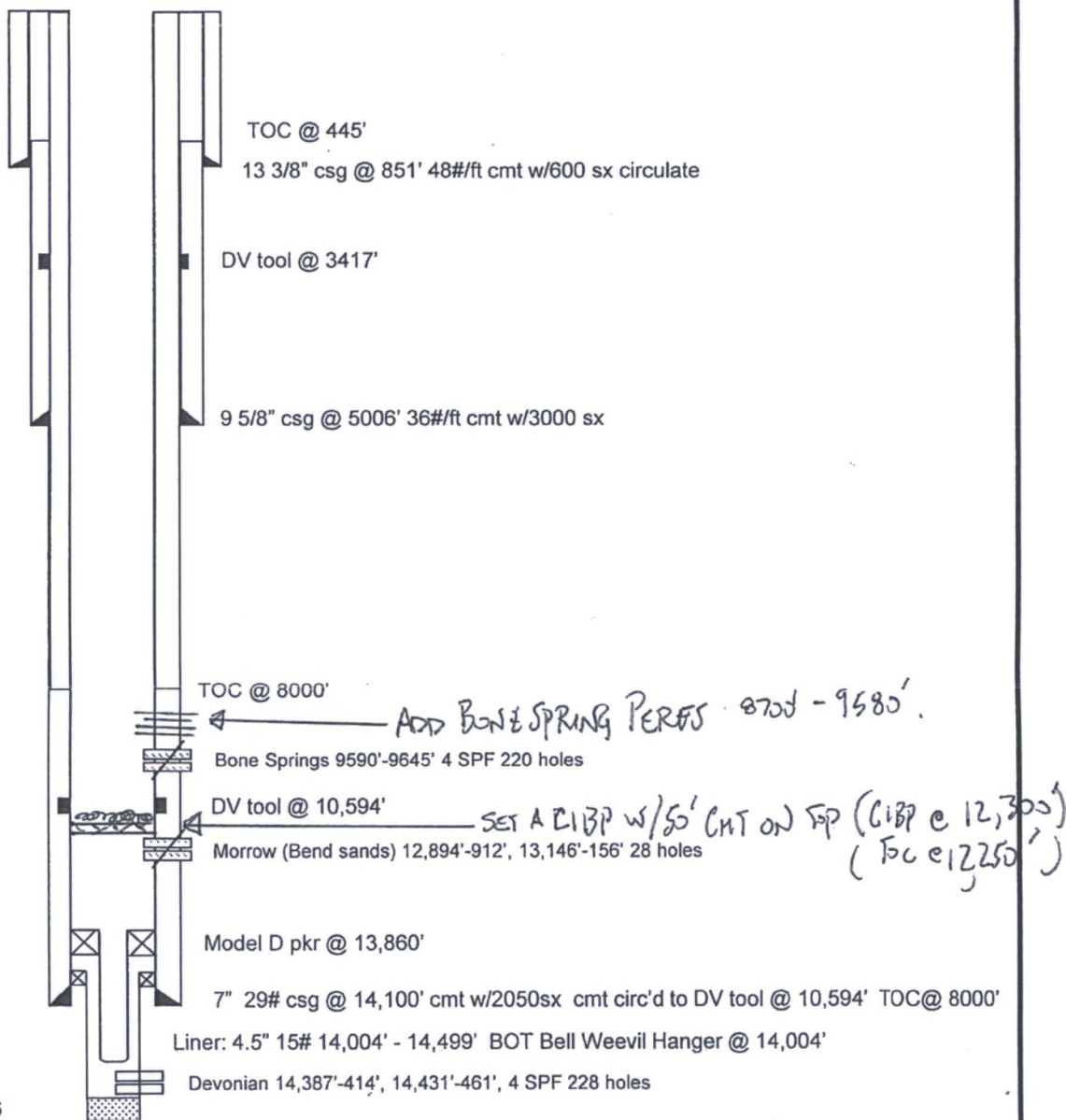
AFTER ADDING ADDITIONAL  
BONE SPRING PAY.

FIELD: LEA  
LEASE: LEA UNIT  
COUNTY: LEA  
STATE: NEW MEXICO

GL: 3667  
KB: 3688  
SPUD DATE: 3/1961  
API No:

DATE: 3/27/2000  
BY: dp darden  
WELL: 2

LOCATION: 1950' FNL & 1950' FWL SEC 12, T20S, R34E



PBTD: 14,476

TD: 14,501