

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

HOBBS OCD  
JUL 18 2018  
RECEIVED

Submit one copy to appropriate District Office

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address <b>LEGACY RESERVES OPERATING LP PO BOX 10848 MIDLAND, TX 79702</b>		<sup>2</sup> OGRID Number <b>240974</b>
		<sup>3</sup> Reason for Filing Code/ Effective Date <b>NW/04-02-2018</b>
<sup>4</sup> API Number <b>30 - 025-44027</b>	<sup>5</sup> Pool Name <b>LEA; BONE SPRING</b>	<sup>6</sup> Pool Code <b>37570</b>
<sup>7</sup> Property Code <b>302802</b>	<sup>8</sup> Property Name <b>LEA UNIT</b>	<sup>9</sup> Well Number <b>58H</b>

**II. <sup>10</sup> Surface Location**

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	11	20S	34E		170	N	1115	E	LEA

**<sup>11</sup> Bottom Hole Location**

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	14	20S	34E		2305	N	443	E	LEA
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
34053	PLAINS MARKETING, L.P. 500 DALLAS, STE. 700, HOUSTON, TX	OIL
24650	TARGA MIDSTREAM SERVICES LLC 1000 LOUISIANA, STE. 4700, HOUSTON, TX 77002	GAS

**IV. Well Completion Data**

<sup>21</sup> Spud Date 12/21/2017	<sup>22</sup> Ready Date 04/02/2018	<sup>23</sup> TD 16,680' MD	<sup>24</sup> PBTB 16,630'	<sup>25</sup> Perforations 9,888'-16,685'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	1,812'	1500 sx		
12 1/4"	9 5/8"	5,612'	4150 sx		
8 3/4"	5 1/2"	16,680'	2900 sx		
	2 7/8"	8,869'			

**V. Well Test Data**

<sup>31</sup> Date New Oil 04/03/2018	<sup>32</sup> Gas Delivery Date 04/12/2018	<sup>33</sup> Test Date 05/22/2018	<sup>34</sup> Test Length 24 HRS	<sup>35</sup> Tbg. Pressure 320	<sup>36</sup> Csg. Pressure 280
<sup>37</sup> Choke Size	<sup>38</sup> Oil 1051	<sup>39</sup> Water 2103	<sup>40</sup> Gas 1026	<sup>41</sup> Test Method Pumping	

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Laura Pina*

Printed name: **LAURA PINA**

Title: **COMPLIANCE COORDINATOR**

E-mail Address: **lpina@legacylp.com**

Date: **07/12/2018** Phone: **432-689-5200**

OIL CONSERVATION DIVISION	
Approved by: <i>Karen Sharp</i>	
Title: <i>Staff Mgr</i>	
Approval Date: <i>7-18-18</i>	

Documents pending BLM approval will subsequently be reviewed and scanned

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.*

5. Lease Serial No.  
NMNM080262

6. If Indian, Allottee or Tribe Name



**HOBBS OCD**  
**JUL 16 2018**  
**RECEIVED**

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. LEA UNIT 58H
2. Name of Operator LEGACY RESERVES OPERATING LP Contact: LAURA PINA E-Mail: lpina@legacylp.com		9. API Well No. 30-025-44027
3a. Address 303 W WALL ST STE 1800 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-689-5200 Ext: 5273	10. Field and Pool or Exploratory Area LEA; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T20S R34E NENE 170FNL 1115FEL		11. County or Parish, State LEA CO 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 recomplete 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 recompletion 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.

02/23/2018 Ran Gamma Ray/CCL log.

03/17/2018 to 03/25/2018 Perf Bone Spring fr/9,369'-16,685' MD w/1,020 shots. Treated well w/2,602 bbls 10% acid, 8,484,560# sand and 221,774 BW.

03/27/2018 to 04/01/2018 Drilled out plugs.

04/03/2018 Began flowback operations.

04/03/2018 Date of first production.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #424904 verified by the BLM Well Information System For LEGACY RESERVES OPERATING LP, sent to the Hobbs</b>	
Name (Printed/Typed) LAURA PINA	Title COMPLIANCE COORDINATOR
Signature (Electronic Submission)	Date 06/21/2018

**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 _____

*Documents pending BLM approval will  
subsequently be reviewed and scanned*

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 States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Department or agency of the United States

(Instructions on page 2)

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010



WELL COMPLETION OR RECOMPLETION REPORT AND LOGS

**HOBBS OCD**  
**RECEIVED**  
JUN 16 2018

1. Type of Well  Oil Well  Gas Well  Dry  Other  
 b. Type of Completion  New Well  Work Over  Deepen  Plug Back  Diff. Resvr.  
 Other \_\_\_\_\_

2. Name of Operator: LEGACY RESERVES OPERATING LP-Mail: jsaenz@legacylp.com Contact: JOHN SAENZ

3. Address: 303 W WALL ST STE 1800 MIDLAND, TX 79701 3a. Phone No. (include area code) Ph: 432-689-5200

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
 At surface: Sec 11 T20S R34E Mer NENE 170FNL 1115FEL  
 At top prod interval reported below: Sec 14 T20S R34E Mer  
 At total depth: SENE 2305FNL 443FEL

5. Lease Serial No. NNMN080262

6. If Indian, Allottee or Tribe Name \_\_\_\_\_

7. Unit or CA Agreement Name and No. \_\_\_\_\_

8. Lease Name and Well No. LEA UNIT 168H

9. API Well No. 30-025-44027

10. Field and Pool, or Exploratory LEA; BONE SPRING

11. Sec., T., R., M., or Block and Survey or Area Sec 11 T20S R34E Mer

12. County or Parish LEA \_\_\_\_\_ 13. State NM

14. Date Spudded 12/21/2017 15. Date T.D. Reached 02/08/2018 16. Date Completed  D & A  Ready to Prod. 04/02/2018

17. Elevations (DF, KB, RT, GL)\* 3663 GL

18. Total Depth: MD 16680 TVD 9595 19. Plug Back T.D.: MD 16630 TVD 9595 20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR-CCL 22. Was well cored?  No  Yes (Submit analysis)  
 Was DST run?  No  Yes (Submit analysis)  
 Directional Survey?  No  Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.5	0	1812		1500		0	
12.250	9.625 J-55	40.0	0	5612		4150		0	
8.750	5.500 HCP-110	20.0	0	16680		2900		0	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	8869							

25. Producing Intervals 26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	9369	16685	9888 TO 16685		1020	PRODUCING
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9888 TO 16685	TREAT WELL W/2,602 BBLs ACID, 8,484,560# SAND & 221,774 BBLs WTR

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
04/03/2018	05/22/2018	24	▶	1051.0	1026.0	2103.0	38.0	0.60	ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
SI	320	280.0	▶	1051	1026	2103	976	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			▶						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
SI			▶						

Documents pending BLM approval will subsequently be reviewed and scanned

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
**SOLD**

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
BONE SPRING	8320	8840		BELL	5567
1ST BONE SPRING	9489	10136		BRUSHY CANYON	6569
2ND BONE SPRING	10136	10868		BONE SPRING	8320
3RD BONE SPRING	10868	10996		1ST BONE SPRING	9489
				2ND BONE SPRING	10136
				3RD BONE SPRING	10868

32. Additional remarks (include plugging procedure):

DIRECTIONAL SURVEY ATTACHED. LOG WILL BE MAILED TO THE BLM CARLSBAD OFFICE.

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #427274 Verified by the BLM Well Information System.  
 For LEGACY RESERVES OPERATING LP, sent to the Hobbs**

Name (please print) JOHN SAENZ Title OPERATIONS ENGINEER

Signature (Electronic Submission) Date 07/13/2018

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.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***