Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103		
<u>District 1</u> – (575) 393-6161 1625 N French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		October 13, 2009 WELL API NO.		
<u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION		30-015-05443		
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Francis Dr.		5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410			STATE [6. State Oil & Ga		ED_
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sunta 1 C, 1	111 07303	6. State Oil & Ga	s Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			TURNER B		
1. Type of Well: Oil Well Gas Well Other INJECTION			8. Well Number: 054 9. OGRID Number 269324		
2. Name of Operator LINN OPERATING, INC.					
3. Address of Operator 600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002			10. Pool name or Wildcat MALJAMAR;GRAYBURG-SAN		
			ANDRES		
4. Well Location Unit Letter F; 19	180 feet from the	N line and 19	80 feet from t	he W lin	ıe
Section 29	Township	17S Range 31	E NMPM		1
	11. Elevation (Show wheth	her DR, RKB, RT, GR, etc			
	1		W=-01=		
12. Check A	Appropriate Box to India	cate Nature of Notice	, Report or Other	Data	
NOTICE OF IN	TENTION TO:	SUE	SEQUENT RE	PORT OF:	
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK				ALTERING CASING	
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS [MULTIPLE COMPL [☐ COMMENCE DE	RILLING OPNS.□ NT JOB □	P AND A	Ш
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MOLTIPLE COMPL [_ CASING/CEME	NI JOB LI		
OTHER:	I	OTHER:		l	
13. Describe proposed or comp					date
proposed completion or rec	ork). SEE RULE 19.15.7.14 ompletion.	NMAC. For Multiple Co	ompletions: Attach v	velibore diagram of	
DOOLLAW TRO & DAOL	CD OLEAN OUT	AND ACIDIZE			
POOH W/ TBG & PACK TUBING AND SET PAC	The state of the s				
WELL DID NOT P	MEN W 3000, NE	10KN 4/24/12		1.	
WELL DE O NOT 1	5 I WAN LED & P	BSS MIT.		RECEIVE	_
WELL MUST BE REPARLED & PASS MIT. NOTIFICORD TO WITNESS					
7.0((() 0 = 1				AUG 24 2012	
Spud Date:	Rig Rel	ease Date:		NMOCD ARTES	SIA
I hereby certify that the information	above is true and complete t	o the best of my knowled	ge and belief.		
Mill	cho.		•		
SIGNATURE SUMM	TITLE:	REGULATORY SPEC	IALIST III_DATE	AUGUST 23, 2012	
Type or print name TERRY B. CAL	<u>LAHAN</u> E-mail address: <u>t</u> c	callahan@linnenergy.com	PHONE: <u>281-840-</u>	<u>4272</u>	
For State Use Only	1			. 1)	
APPROVED BY: Conditions of Approval (if any):	Mus TITLE	Computance (XFACEF DA	TE <u>8/34/12</u>	