

Submit 1 Copy To Appropriate District  
Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 3001530063
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. NM22080
7. Lease Name or Unit Agreement Name Barclay Federal
8. Well Number 11
9. OGRID Number 000990
10. Pool name or Wildcat Livingston Ridge

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  
PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator LINN Energy
3. Address of Operator 600 Travis Street Suite 5100, Houston, Texas 77002
4. Well Location Unit Letter A: 660 feet from the North line and 660 feet from the East line Section 12 Township 23S Range 31E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3495
--

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: Location is ready for inspection after P&A <input checked="" type="checkbox"/>	

- ☒ All pits have been remediated in compliance with OCD rules and terms of the operator permit and closure plan.  
☒ Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  
☒ A steel marker at least 4" in diameter and at least 4" above ground level has been set in concrete. It shows the:

operator name, lease name, well number, API number, quarter / quarter location or unit letter, section, township, and range. All information has been welded or permanently stamped on the markers surface.

- ☒ The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and other production equipment.  
☒ Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.  
☒ If this is a one well lease or the last remaining well on lease, the battery and pit locations have been remediated in compliance with OCD rules and the terms of the operators pit permit closure plan. All flow lines, production equipment, and junk have been removed from the lease and well location.  
☒ All metal bolts, and other materials have been removed. Portable bases have been removed. (poured onsite concrete bases do not have to be removed.)  
☒ All other environmental concerns have been addressed as per OCD rules.  
☒ Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved lines and pipelines.  
☒ If this is a one well lease or last remaining well on lease, all electrical service poles and lines have been removed from lease and well location except for utility's distribution infrastructure

*Below ground MARKER* NM OIL CONSERVATION  
ARTESIA DISTRICT  
DEC 23 2014

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Bob Akin* TITLE *Production Foreman* DATE *11/26/14*  
Type or print name *B Akin* E-mail address: *raikin@linnenergy.com* PHONE: *505 390 8007*  
For State

Accepted for record

*Don Harvey* TITLE *Compliance Officer* DATE *2-5-15*  
*OK to Release*