

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.
NMLC065014

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
MAX FRIESS MA 79. API Well No.
30-015-26883-00-S110. Field and Pool or Exploratory Area
GRAYBURG11. County or Parish, State
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Contact: DILLON A SALAS
LINN OPERATING INCORPORATED E-Mail: apollo.salas44@gmail.com

3a. Address

600 TRAVIS STREET SUITE 5100
HOUSTON, TX 77002

3b. Phone No. (include area code)

Ph: 575-492-1236
Fx: 575-492-1237

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

Sec 30 T17S R31E SWNE 2610FNL 1460FEL

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 checked="" 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 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.

- When Pogo took over operations from previous operator, this well was shut-in.
- Pogo turned this well to production in Oct 2018. Producing 1.5bopd and 3.45bwpd.

NM OIL CONSERVATION
ARTESIA DISTRICT

FEB 08 2019

RECEIVEDGC 2/19/19
Accepted for record - NMOC

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

Electronic Submission #450606 verified by the BLM Well Information System

For LINN OPERATING INCORPORATED, sent to the Carlsbad

Committed to AFMSS for processing by PRISCILLA PEREZ on 01/29/2019 (19PP0768SE)

Name (Printed/Typed) MERCH MERCHANT

Title PROJECT MANAGER

Signature (Electronic Submission)

Date 01/15/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

FEB 01 2019

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

/s/ Jonathon Shepard

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)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No. MAX FRIESS MA #007

2. Name of Operator POGO OIL & GAS OPERATING, INC

9. API Well No. 30-015-26883

3a. Address 1515 CALLE SUR, SUITE 174
HOBBS, NM 88240

3b. Phone No. (include area code)
(575) 492-1236

10. Field and Pool or Exploratory Area
GRAYBURG JACKSON

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC 30 T17S R31E 2610FNL 1460FEL

11. Country or Parish, State
EDDY COUNTY, NM

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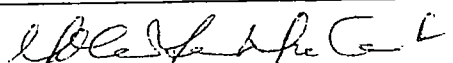
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14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
M.Y. Merchant

Project Manager
Title

Signature



Date

01/14/2019

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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