

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

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

Form C-103

October 13, 2009

WELL API NO.

30-025-36832

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

EAST HOBBS SAN ANDRES UNIT

8. Well Number: 505

9. OGRID Number 269324

10. Pool name or Wildcat
HOBBS; SAN ANDRES, EAST

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 ☒ Gas Well ☐ Other

HOBBS OCD

2. Name of Operator

LINN OPERATING, INC.

MAY 14 2014

3. Address of Operator

600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002

RECEIVED

4. Well Location

Unit Letter J 1720 feet from the S line and 2340 feet from the E line
Section 30 Township 18S Range 39E NMPM LEA County

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

3604' DF Elevation

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: BHT ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Replaced top joint with 4' sub & valve, contacted Maxey Brown at the OCD and re-ran Bradenhead test (passed and not witnessed).

Attached:

BHT

Copy of Letter of Violation

Spud Date:

Rig Release Date:

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

SIGNATURE

Terry B. Callahan

TITLE: Regulatory Compliance Specialist III

DATE May 14, 2014

Type or print name TERRY B. CALLAHAN

E-mail address tcallahan@linnenergy.com

PHONE: 281-840-4272

For State Use Only

FOR RECORD ONLY

Bill Lawrence

TITLE

Staff Manager

DATE 5/20/2014

Conditions of Approval (if any):

FOR RECORD ONLY

MAY 20 2014