Submit One Copy To Appropriate District State of New Mexico	Farms C 102
Office State of New Mexico	Form C-103 Revised November 3, 2011
District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1220 South St. Francis Dr.	WELL API NO.
District II 811 S. First St., Artesia, NM 88210 CONSERVATION DIVISION	30-025-11694 5. Indicate Type of Lease
	STATE FEE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505	
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	7. Lease Name or Unit Agreement Name Langlie Mattix Queen Unit
PROPOSALS.) 1. Type of Well: X Oil Well Gas Well Other	8. Well Number 30
2. Name of Operator	9. OGRID Number
LINN 3. Address of Operator	269324 10. Pool name or Wildcat
2130 West Bender Hobbs, N.M.	Langlie Mattix 7 RVRS Queen
4. Well Location	
Unit Letter A: 330 feet from the N line and 990 feet from the E line	
Section 22 Township 25S Range 37E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A X	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	
OTHER:	
X All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.	
X Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.	
X 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 MARKER'S SURFACE.	
X 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.	
X Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.	
X If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from	
lease and well location.	
X All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)	
X All other environmental concerns have been addressed as per OCD rules.	
X Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-	
retrieved flow lines and pipelines. X 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.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURE Kicksian TITLE PROS. FOR	e DATE_ 2 - 7 - 18_
TYPE OR PRINT NAMEE-MAIL: Pricking w@linnened	
For State Use Only	/ /
APPROVED BY Markhathan TITLE P.E.S.	DATE 02/08/2018