

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

Hobbs

FORM 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.
NMLC059152B

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

MAY 08 2018

RECEIVED

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

LINN OPERATING, LLC

Contact: MINDY K KOTESKY

E-Mail: MKOTESKY@LINNENERGY.COM

8. Well Name and No.

CAPROCK MALJIMAR UNIT B 63

9. API Well No.

30-025-00663

3a. Address

600 TRAVIS STE. 1400
HOUSTON, TX 77002

3b. Phone No. (include area code)

Ph: 281-840-4208

10. Field and Pool or Exploratory Area

MALJIMAR; GRAYBURG-SAN AND

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

Sec 24 T17S R32E Mer 6PM NESE 1980FSL 660FEL

11. County or Parish, State

LEA COUNTY COUNTY, NM

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 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Venting and/or Flaring
	<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 recompletion 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.

LINN OPERATING, LLC SUBMITTED AN NOI TO FLARE THE CAPROCK MALJIMAR UNIT B BATTERY FROM 12/03/17 TO 03/03/18.

LINN'S MONTHLY FLARE VOLUMES DURING THE REQUESTED PERIOD ARE AS FOLLOWS:

DEC 2017 - 369 MCF
JAN 2018 - 282 MCF
FEB 2018 - 250 MCF
MAR 2018 - 239 MCF

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #411990 verified by the BLM Well Information System For LINN OPERATING, LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/17/2018 ()	
Name (Printed/Typed) MINDY K KOTESKY	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 04/17/2018
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By _____	Title _____ 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 _____
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)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Accepted for Record Only
MKB/ocd
5/8/2018

CMU 187 SATELLITE

API	Well Name	Well Number	Type
30-025-00663	CAPROCK MALJAMAR UNIT	#063 ✓	Oil
30-025-00670	CAPROCK MALJAMAR UNIT	#073 ✓	Oil
30-025-33517	CAPROCK MALJAMAR UNIT	#171 ✓	Oil
30-025-33423	CAPROCK MALJAMAR UNIT	#172 ✓	Oil
30-025-33422	CAPROCK MALJAMAR UNIT	#186 ✓	Oil
30-025-33421	CAPROCK MALJAMAR UNIT	#187 ✓	Oil
30-025-24810	CAPROCK MALJAMAR UNIT	#201 ✓	Oil
30-025-26552	CAPROCK MALJAMAR UNIT	#202 ✓	Oil
30-025-33841	CAPROCK MALJAMAR UNIT	#268 ✓	Oil