Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

OCD Artesia

FORM APPROVED OMB NO 1004-0135 Expires: July 31, 2010

5. Lease Serial No. NMLC029426B

Do not use this form for proposals to drill or to re-enter an	
	6 If Indian Allottes or Tribe Name

abandoned well. Use form 3160-3 (APD) for such proposals.				b. If Indian, Allottee of Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7 If Unit or CA/Agreement, Name and/or No.		
1 Type of Well  ☐ Oil Well ☐ Gas Well ☒ Other: INJECTION			.	8. Well Name and No. H E WEST B 044		
Name of Operator Contact. NANCY S FILINN OPERATING, INC. E-Mail: nfitzwater@linnenergy.com				9. API Well No 30-015-26574		
3a Address       3b. Phone No         600 TRAVIS ST., SUITE 5100       Ph: 281-84         HOUSTON, TX 77002       Fx: 281-840			code)	10. Field and Pool, or Exploratory GRAYBURG JACKSON;SR-Q-G-S		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11 County or Parish, and State		
Sec 3 T17S R31E Mer NMP SESW 720FSL 1980FWL 32.858370 N Lat, 103.859050 W Lon			•	EDDY COUNTY, NM		
12. CHECK APPL	ROPRIATE BOX(ES) TO I	NDICATE NATURE (	OF NOTICE, REP	ORT, OR OTHER	R DATA	
TYPE OF SUBMISSION		TYPE OF ACTION				
Notice of Intent	□ Acidize	□ Deepen	□ Production	n (Start/Resume)	☐ Water Shut-Off	
_	☐ Alter Casing	☐ Fracture Treat	Reclamati	on ·	☐ Well Integrity	
☐ Subsequent Report	Casing Repair	☐ New Construction	Recomple	te	Other Workover Operations	
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	□ Temporari	ly Abandon	Workover Operations	
	Convert to Injection	□ Plug Back	Back Water Disposal			
CONDI	TACHED FOR	only after all requirements, in TAK ON THE CSG. INS N, PLAN TO TEST CSC AKS AFTER SECURIN ACCEPTED NMC	ecluding reclamation, PECT & REPLAC FOR LEAKS. IF	have been completed, i E TBG & PKR AS F CSG FAILS TO h	HOLD TE REGULATORY 2011	
14 Thereby certify that the foregoing is true and correct Electronic Submission #111751 verified by the BLM Well Information System						
	For LINN OPE	RATING, INC., sent to th	e Carlsbad			
Name (Printed/Typed) NANCY S FITZWATER Title RE		GULATORY COM	PLIANCE ADVISO	R		
Signature (Electronic Submission) . [			Date 06/28/2011 .			
	THIS SPACE FOR	FEDERAL OR STAT	E OFFICE USE		·	
	ttol 2	· <del>!</del>	PET	(	Date 7/3/11	
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						