

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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

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.

HOBBS OCD

5. Lease Serial No. NMNM70974X Fee

6. If Indian, Allottee or Tribe Name

DEC 01 2014

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator LINN OPERATING INC Contact: TERRY B CALLAHAN
E-Mail: tcallahan@linnenergy.com

3a. Address 600 TRAVIS, SUITE 5100
HOUSTON, TX 77002

3b. Phone No. (include area code)
Ph: 281-840-4272

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 15 T25S R37E Mer NMP SWSE 330FSL 1650FEL
32.123942 N Lat, 103.147566 W Lon

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

8. Well Name and No.
LANGLIE MATTIX QUEEN UNIT 24

9. API Well No.
30-025-11600

10. Field and Pool, or Exploratory
LANGLIE MATTIX; 7 RVRS-Q-G

11. County or Parish, and State
LEA COUNTY, NM

RECEIVED

12. CHECK 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"/> Fracture Treat	<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	Site Facility Diagram/Security Plan
	<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 recomplete 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

PLEASE FIND ATTACHED THE LANGLIE MATTIX SATELLITE BATTERY SITE FACILITY DIAGRAM.

- API Well Name Well Number
- 30-025-11600 LANGLIE MATTIX QUEEN UNIT #024
 - 30-025-11695 LANGLIE MATTIX QUEEN UNIT #029
 - 30-025-11689 LANGLIE MATTIX QUEEN UNIT #034
 - 30-025-23766 LANGLIE MATTIX QUEEN UNIT #038
 - 30-025-11688 LANGLIE MATTIX QUEEN UNIT #040

Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
Date: 11/18/14
[Signature]

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

Electronic Submission #226342 verified by the BLM Well Information System
For LINN OPERATING INC, sent to the Hobbs
Committed to AFMSS for processing by JOHNNY DICKERSON on 12/04/2013 ()

Name (Printed/Typed) TERRY B CALLAHAN Title REG COMPL SPECIALIST-III

Signature (Electronic Submission) Date 11/12/2013

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.

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

TMB/OCD 12/1/2014

DEC 01 2014

Langlie Mattix Satellite Battery
 Eddy County, New Mexico
 BLM # 91-011576
 Sec 8 -T17S – R31E

Langlie Mattix 24
 Langlie Mattix 29
 Langlie Mattix 34
 Langlie Mattix 38
 Langlie Mattix 40

Site Facility Diagram
 Linn Operating, Inc.
 Site Facility Plan Located at
 Hobbs, New Mexico
 Field Office



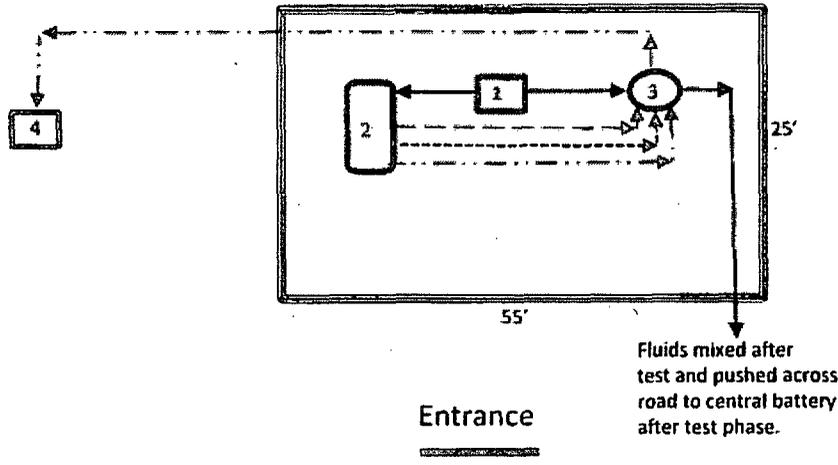
2130 West Bender
 Hobbs, New Mexico 88240

Office Hours 7:00 AM-4:00 PM MST
 Monday-Thursday and every other Friday.

Prepared by Jay McCraw
 Odessa, TX
 November 2012

—	Flow Line
- - -	Water Line
---	Oil Line
- · -	Gas Line
—	Burm
⊗	Water Tank Valve
⊗	Open not Sealed
⊗	Open/Closed
⊗	Sealed Closed or open for circulating
⊗	Sealed Closed
⊗	Open during sale of disposition
⊗	Sealed Closed
⊗	Other than for water drain
⊗	Load Line Valve
⊗	Sealed and or locked
⊗	Out of Service

1-Header
 2-3 Phase Horizontal test vessel
 3-24 Inch X 12 Ft 2 phase separator
 4-GSM Southern Union ID # 63038



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Jay McCraw