

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

Form C-103
 October 13, 2009

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

WELL API NO. 30-015-29926
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name BARCLAY STATE
8. Well Number: 008
9. OGRID Number 269324
10. Pool name or Wildcat LIVINGSTON RIDGE;DELAWARE; SOUTH

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

2. Name of Operator
LINN OPERATING, INC.

3. Address of Operator
600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002

4. Well Location
 Unit Letter A; 990 feet from the N line and 470 feet from the E line
 Section 02 Township 23S Range 31E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3447' GR

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: RETURN TO PRODUCTION <input checked="" type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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.

RIH W/ PKR & PLUG TO SWAB TEST EACH PRODUCING INTERVAL. (6248-6252, 6611-6617, 6656-6662, 6928-6934, 7012-7025, 7427-7431, 7774-7777, 8334-8244)

Spud Date: Rig Release Date:

RECEIVED
 JUL 11 2013
 NMOCD ARTESIA

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

SIGNATURE Terry Callahan TITLE: REGULATORY COMPLIANCE SPEC III DATE JULY 05, 2013

Type or print name TERRY B. CALLAHAN E-mail address: tcallahan@linnenergy.com PHONE: 281-840-4272

APPROVED BY: [Signature] TITLE: Dist # Supervisor DATE: July 11, 2013

Conditions of Approval (if any):

Wellbore Schematic

Well Name: Barclay State 8
 Location: A-02-23S-31E LOT 1 990 FNL & 470 FEL
EDDY COUNTY, NM
 API #: 30-15-29926

Elevations: GROUND: 3447'
 KB: 16' - original KB: 3463'
 Depths (KB): PBDT: 8351'
 TD: 8400'

Date Prepared: K. MURPHY
 Last Updated: 19-Apr-11
 Spud Date: 30-May-98
 RR Date: _____
 Spud Date to RR Date: _____
 Completion Start Date: _____
 Completion End Date: _____
 Completion Total Days: _____
 Co-ordinates: _____

