

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

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.*5. Lease Serial No.
NMLC029395A

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
TURNER A 382. Name of Operator
LINN OPERATING INCContact: LAURA A MORENO
E-Mail: lmoreno@linnenergy.com9. API Well No.
30-015-287693a. Address
600 TRAVIS STREET, SUITE 5100
HOUSTON, TX 770023b. Phone No. (include area code)
Ph: 713-904-665710. Field and Pool, or Exploratory
GRAYBURG JACKSON;SR-Q-G-S

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

Sec 18 T17S R31E Mer NMP NWSW 1400FSL 900FWL
32.831109 N Lat, 103.913978 W Lon11. County or Parish, and State
EDDY COUNTY, NM**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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	
	<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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat 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.)

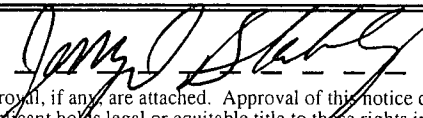
REQUEST TO FLARE 38 MCF/D FOR 90 DAYS DUE TO FRONTIER GAS PLANT SHUT IN FOR REPAIRS.

API Well Name Well Number Type Lease
30-015-28769 TURNER A #038 Oil Federal
30-015-28770 TURNER A #039 Oil Federal
30-015-28792 TURNER A #040 Oil Federal
30-015-28836 TURNER A #041 Oil Federal
30-015-28916 TURNER A #042 Oil Federal
30-015-28793 TURNER A #043 Oil Federal
30-015-28771 TURNER A #044 Oil Federal
30-015-28890 TURNER A #045 Oil Federal
30-015-28891 TURNER A #046 Oil Federal

SUBJECT TO LIKE
APPROVAL BY STATESEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #215289 verified by the BLM Well Information System For LINN OPERATING INC, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 08/07/2013 ()		RECEIVED AUG 21 2013 NMOCD ARTESIA
Name (Printed/Typed) LAURA A MORENO	Title REG COMPLIANCE ADVISOR	
Signature (Electronic Submission)	Date 07/30/2013	

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title	APPROVED AUG 19 2013 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	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 these 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 ****

Additional data for EC transaction #215289 that would not fit on the form

32. Additional remarks, continued

30-015-28917 TURNER A #047 Oil Federal
30-015-28869 TURNER A #048 Oil Federal
30-015-28837 TURNER A #049 Oil Federal
30-015-28772 TURNER A #050 Oil Federal
30-015-28758 TURNER A #051 Oil Federal
30-015-28773 TURNER A #053 Oil Federal
30-015-28918 TURNER A #055 Oil Federal
30-015-29761 TURNER A #060 Oil Federal

BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972

7/2/2013

Condition of Approval to Flare Gas

1. Report all volumes on OGOR reports.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. **Flared volumes will still require payment of royalties**
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. *Please Submit Meter #*
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report with actual volumes of gas flared for each month gas is flared.
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JDB722013