Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Serial No.

Do not use thi abandoned wel				12112 TCD781181
		6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRI	7. If Unit or C	7. If Unit or CA/Agreement, Name and/or No.		
I. Type of Well ☐ Oil Well ☐ Gas Well ☑ Oth	8. Well Name NORTH B	and No. ENSON QUEEN UNIT 033		
2. Name of Operator LINN OPERATING INC	9. API Well N 30-015-1			
a. Address 600 TRAVIS STREET, SUITE HOUSTON, TX 77002		10. Field and Pool, or Exploratory BENSON; QUEEN-GRAYBURG, NO		
Location of Well (Footage, Sec., T.	11. County or	11. County or Parish, and State		
Sec 33 T18S R30E Mer NMP 32.709408 N Lat, 103.973801	EDDY C	OUNTY, NM		
12. СНЕСК АРРГ	ROPRIATE BOX(ES) TO	INDICATE NATURE OF I	NOTICE, REPORT, OR	OTHER DATA
TYPE OF SUBMISSION		TYPE O	FACTION	
☑ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resu	ume)
	☐ Alter Casing	☐ Fracture Treat	□ Reclamation	☐ Well Integrity
☐ Subsequent Report	☐ Casing Repair	■ New Construction	☐ Recomplete	☐ Other
☐ Final Abandonment Notice	☐ Change Plans ☐ Convert to Injection	Plug and Abandon	☐ Temporarily Abandon	
PROPOSED PLUGGING PROPOSED PLUGGING PROPOSED PLUGGING PROPOSED PLUGGING PROPOSED PLUGGING PROPOSED PROP	DOEDURES Record PMENT Thy. Se	nhole conditi (s indicate 5 4@ 2750 w)	ons ditter	trom this property
2. RIH & SET 5-1/2" CIBP @ 3. PERF 5-1/2 @ 1630',SQZ 54. PERF 5-1/2 @ 732', SQZ 7	55 SXS CMT, DISPLACE 75 SXS CMT. DISPLACEI	CMT. CIRC HOLE W/MUD LA TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO	ADEN FLUID. FM OF SALT) OP OF SALT)	£ 27/8: (Atta
3. PERF 5-1/2 @ 1630',SQZ 5	55 SXS CMT, DISPLACE 75 SXS CMT. DISPLACE 5 SXS TO SURFACE. CU	CMT. CIRC HOLE W/MUD LA TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO DT OFF WELL HEAD AND VE	ADEN FLUID. FM OF SALT) OP OF SALT)	RECEIVED
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3. PERF 5-1/2 @ 1630',SQZ 5 4. PERF 5-1/2 @ 732', SQZ 7 5. PERF 5-1/2 @ 60'. SQZ 35	55 SXS CMT, DISPLACE 5 SXS CMT. DISPLACE 6 SXS TO SURFACE. CU S true and correct. Electronic Submission #	CMT. CIRC HOLE W/MUD LA TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO DT OFF WELL HEAD AND VE	ADEN FLUID. 5/2' IM OF SALT) OP OF SALT) ERIFY ALL ANNULUS.	RECEIVED OCT 2 8 2013
3. PERF 5-1/2 @ 1630', SQZ 5 4. PERF 5-1/2 @ 732', SQZ 7 5. PERF 5-1/2 @ 60'. SQZ 35 4. I hereby certify that the foregoing is	55 SXS CMT, DISPLACE 5 SXS CMT. DISPLACE 6 SXS TO SURFACE. CU S true and correct. Electronic Submission #	TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO D) TO FF WELL HEAD AND VENERAL PROPERTING INC., sent to the C.	ADEN FLUID. 5/2' IM OF SALT) OP OF SALT) ERIFY ALL ANNULUS.	RECEIVED OCT 2 8 2013 NMOCD ARTESIA
3. PERF 5-1/2 @ 1630', SQZ 5 4. PERF 5-1/2 @ 732', SQZ 7 5. PERF 5-1/2 @ 60'. SQZ 35 4. I hereby certify that the foregoing is	55 SXS CMT, DISPLACE 5 SXS CMT. DISPLACE 6 SXS TO SURFACE. CU S True and correct. Electronic Submission # For LINN C	TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO D) TO FF WELL HEAD AND VENERAL PROPERTING INC., sent to the C.	ADEN FLUID. TM OF SALT) OP OF SALT) ERIFY ALL ANNULUS. EII Information System arisbad EOMPLIANCE SPECIALIS	RECEIVED OCT 2 8 2013 NMOCD ARTESIA
3. PERF 5-1/2 @ 1630', SQZ 5 4. PERF 5-1/2 @ 732', SQZ 7 5. PERF 5-1/2 @ 60'. SQZ 35 4. I hereby certify that the foregoing is Name (Printed/Typed) TERRY B	55 SXS CMT, DISPLACE 5 SXS CMT. DISPLACE 6 SXS TO SURFACE. CU 6 SXS TO SURFACE. CU 6 NIMC 8 true and correct. 6 Electronic Submission # 6 For LINN C CALLAHAN Submission)	TO 1530'. WOC & TAG. (BT D TO 500'. WOC & TAG. (TO D TO F WELL HEAD AND VER TO	ADEN FLUID. 5/2 / IM OF SALT) OP OF SALT) ERIFY ALL ANNULUS. Ell Information System arisbad COMPLIANCE SPECIALIS	RECEIVED OCT 2 8 2013 NMOCD ARTESIA
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Additional data for EC transaction #207888 that would not fit on the form

32. Additional remarks, continued

6. INSTALL GROUND LEVEL DRY HOLD MARKER.

WELLBORE SCHEMATICS ARE ATTACHED.

NOTE: THIS WAS PREVIOUSLY SUBMITTED THRU THE WIS SYSTEM BUT SOMEHOW NEVER MADE IT ON 4/15/2013.

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	EDDY COUNTY 30-015-10229	. 1484			RF Date:	21-04-42	
aci e: "	***** 14-10ct2				Spud Date to RR Date:		
Elevations.	GROUND:	3502			Compaling Start Date:		
	KB:				Completion End Date:	13-060-62	
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5 1/2" Set @ 3366"	- [b		5-1/2" CIBP 0 2845-76 0 3045-60	-			

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rm 3160-5 (ugust 2007)

(Instructions on page 7)

BLM-CAP SB. D FIELD OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-013
European July 21 201

5. Lease Serial No.

" 28978B

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.

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well					NM.033775—NM 70 993 X		
Oil Well Gas Well Other Injection					8. Well Name and No. NBQU NO. 33		
2. Name of Operator Arena Resources Inc					9. API Well No. 30-015-10229		
3a. Address 3b. Phone No. (include area code)					10. Field and Pool or Exploratory Area		
2130 W. Bender, Hobbs, NM 88240 575-738-1739					Benson, North Queen - Grayburg		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)					11. Country or Parish, State		
Unit Letter H: 660 FNL, 1650 FEL, Sec. 33,	T18S, R30E		Eddy				
12. CHEC	K THE APPROPRIATE BO	X(ES) TO INDICAT	E NATURE OF N	NOTICE	E, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION			TYPE OF	ACTIO	N		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Tre	eat	Produc Reclan	ction (Start/Resume)	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	☐ New Constr	ruction	Recom	plete	Other Return well to	
	Change Plans	Plug and Al	oandon	Tempo	rarily Abandon	injection	
Final Abandonment Notice	Convert to Injection	Plug Back		Water	Disposal		
testing has been completed. Final determined that the site is ready for GIH w/5 1/2" permanent packer on RIH w 2 1/16" IPC tbg and packer to Y / Include Contact Lande Lan	Abandonment Notices must final inspection.) 2 7/8" tbg. Set packer at 2700'. Pump packer fluid 8/07 Accf Lease	be filed only after all in 2750'. Circulate ce d. RU Chart. Held o	ment to surface	between injection	eclamation, have been 5 1/2" and 2 7/8 oin. ACCEPTED MAR BUREAU OF 1		
14. I hereby certify that the foregoing is tr COLLEEN ROBINSON	ue and correct. Name (Printer		Compliance Ar	nalvet			
		Title	Joinpliance Al				
Signature attobur)So-	Date	03/06/2008				
	THIS SPACE	FOR FEDERAL	OR STATE	OFFI	CE USE		
Approved by			Ţ Ţ		T		
			j Tritlo			Dete	
Conditions of approval, if any, are attached hat the applicant holds legal or equitable to the applicant to conduct operations to	tle to those rights in the subject hereon.	ct lease which would	Office			Date	
Fitle 18 U.S.C. Section 1001 and Title 43	U.S.C. Section 1212, make it a	crime for any person k	nowingly and willf	fully to	make to any departme	nt or agency of the United States any false,	
ictitious or fraudulent statements or repre	sentations as to any matter wit	tnın its jurisdiction.					

Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88	May 27, 2004 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NMI 20 OIL CONSERVATION DIVISION	3001510229 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 South St. Francis Dr. 2 6 20 Santa Fe, NM 87505 JUN 2 6 20	07 STATE ☐ FEE ☒
87505 OCD-AN1-	51A LC0289778B 7. Lease Name or Unit Agreement Name
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	North Benson Queen Unit
1. Type of Well: Oil Well Gas Well Other Ujec 7 & 2. Name of Operator	Well Number 33 OGRID Nümber
Arena Resources, Inc.	5300
3. Address of Operator	10. Pool name or Wildcat
4920 S. Lewis, Suite 107, Tulsa, OK 74105 4. Well Location	Benson North Queen - Grayburg
Unit Letter H: 660 feet from the North line and 1650	feet from the East line
Section 33 Township 18S Range 30E	NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application or Closure	は、これは後の対象の政治を表現のよう。
Pit type Depth to Groundwater Distance from nearest fresh water well Dist	ance from nearest surface water
	nstruction Material
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK (PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRII	—
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	<u> </u>
OTHER: OTHER:	П
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 1103. For Multiple Completions: Att or recompletion.	ach wellbore diagram of proposed completion
GIH w 5 1/2 permanent packer on 2 7/8" tbgt Set packer at 2750'. Circulate cem RIH w 2 1/16" IPC tbg and packer to 2700'. Pump packer fluid. RU Chart. Held	ent to surface between 5 1/2" and 2 7/8".
Kiri w 2 1/10 1FC tog and packer to 2/00. Fump pucker haid. RO Chart. Held	OK. Fut well on injection.
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I hereby certify that the information above is true and complete to the best of my knowledge grade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] of	and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan .
SIGNATURE TITLE Production Supervis	orDATE_6-26-07
Type or print name Danny M. Palmer E-mail address: dpalmer@arenaresourcesinc.co For State Use Only /	m Telephone No. (505) 738-1739
APPROVED BY: Ally Juy TITLE	DATE 6-26-96
Conditions of Approval (if any)	DATE