|   |   | UNITED STATES<br>EPARTMENT OF THE II<br>UREAU OF LAND MANA   | NTERIÒR   | OCD  | Artesia   | OMB N   | APPROVED<br>O. 1004-0135<br>July 31, 2010 |
|---|---|--|---|--|---|---|---|
|   | SUNDRY NOTICES AND REPORTS ON WELLS<br>Do not use this form for proposals to drill or to re-enter an<br>abandoned well. Use form 3160-3 (APD) for such proposals.   |  |   |  |   | NMNM22080   |   |
|   |   |  |   |  |   | 6. If Indian, Allottee o  | r Tribe Name                              |
| · | SUBMIT IN TRIPLICATE - Other instructions on reverse side.  |  |   |  |   | 7. If Unit or CA/Agree  | ement, Name and/or No.                    |
|   | I. Type of Well Gas Well Other  |  |   |  |   | 8. Well Name and No.<br>BARCLAY FEDE                                  |   |
|   | 2. Name of Operator Contact: TERRY B CALLAHAN<br>LINN OPERATING INCORPORATED E-Mail: tcallahan@linnenergy.com   |  |   |  |   | 9. API Well No.<br>30-015-29683-00-S1                                 |   |
| , | 3a. Address<br>600 TRAVIS STREET SUITE<br>HOUSTON, TX 77002   | 3b. Phone No. (include area code)<br>Ph: 281-840-4272  |   |  | 10. Field and Pool, or Exploratory<br>LIVINGSTON RIDGE            |   |   |
|   | 4. Location of Well (Footage, Sec.,   | · · · · · · · · · · · · · · · · · · ·  |   |  | 11. County or Parish, and State                                   |   |   |
|   | Sec 12 T23S R31E SWSE 66  |  |   |  | EDDY COUNTY   | Υ, NM   |   |
|   | 12. CHECK APP   | ROPRIATE BOX(ES) TO  | ) INDICATE  | NATURE OF N  | IOTICE, R   | EPORT, OR OTHE  | R DATA                                    |
|   | TYPE OF SUBMISSION  |  | TYPE OF ACTION  |  |   | ······································                                |   |
|   | Notice of Intent  | □ Acidize<br>□ Alter Casing  | 🗖 Deep  | en<br>ure Treat  | Produce Reclan  | tion (Start/Resume)   | □ Water Shut-Off<br>□ Well Integrity      |
|   | Subsequent Report   | Casing Repair  | □ New Construction □ Recon                                  |  |   | Other   |   |
|   | Final Abandonment Notice  | Change Plans   |   |  | rarily Abandon  | Venting and/or Flang  |   |
|   | 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.<br>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<br>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<br>testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has<br>determined that the site is ready for final inspection.)<br>REQUEST APPROVAL TO FLARE 162 MCF/D FROM NMNM22080 FOR 90 DAYS DUE TO DCP HIGH LINE PRESSURE |  |   |  |   |   |   |
| ` | ISSUES. DCP IS HAVING ISSUES WITH HANDLING VOLUMES OF GAS BEING PRODUCED IN THE AREA DUE TO NEW WELLS BEING DRILLING AROUND THE AREA.   |  |   |  |   |   |   |
|   | API Well Name Well Number Type Lease Status<br>30-015-29683 BARCLAY FEDERAL #002 Oil Federal Active<br>30-015-29684 BARCLAY FEDERAL #003 Oil Federal Active<br>30-015-29685 BARCLAY FEDERAL #004 Oil Federal Active<br>30-015-29786 BARCLAY FEDERAL #005 Oil Federal Active<br>30-015-29787 BARCLAY FEDERAL #009 Oil Federal Active<br>30-015-30239 BARCLAY FEDERAL #010 Oil Federal Active<br>30-015-30239 BARCLAY FEDERAL #010 Oil Federal Active   |  |   |  |   |   |   |
|   | 30-015-29787 BARCLAY FE   |  |   | Accepte  |   | CHILD 1 3 2015  |   |
|   | 30-015-29787 BARCLAY FE   | DERAL #010 Oil Federal A   | Active  | NT.  |   | RECEIVED  |   |
|   | 30-015-29787 BARCLAY FE<br>30-015-30239 BARCLAY FE<br>14. I hereby certify that the foregoing   | DERAL #010 Oil Federal A<br>s true and correct.<br>Electronic Submission #<br>For LINN OPERA   | Active<br>238098 verified<br>TING INCORPO                   | by the BLM Wel   | I Informatio  | RECEIVED  |   |
| · | 30-015-29787 BARCLAY FE<br>30-015-30239 BARCLAY FE<br>14. I hereby certify that the foregoing   | DERAL #010 Oil Federal A   | Active<br>238098 verified<br>TING INCORPO                   | by the BLM Wel<br>RATED, sent to<br>EL MAYES on 0                                  | I Informatio<br>the Carlsb<br>5/02/2014 (1                        | RECEIVED  | הכ  |
|   | 30-015-29787 BARCLAY FE<br>30-015-30239 BARCLAY FE<br>14. I hereby certify that the foregoing<br>14. Name (Printed/Typed) CCC<br>Name (Printed/Typed) TERRY E   | DERAL #010 Oil Federal A<br>s true and correct.<br>Electronic Submission #<br>For LINN OPERA<br>mmitted to AFMSS for proc                            | Active<br>238098 verified<br>TING INCORPO<br>sessing by ANG | by the BLM Wel<br>RATED, sent to<br>EL MAYES on 0<br>Title REG CC                  | I Informatic<br>the Carlsbi<br>5/02/2014 (1<br>DMPLIANC<br>CCEPTE | RECEIVED<br>on System<br>ad<br>4AXM0025SE)                            |   |
|   | 30-015-29787 BARCLAY FE<br>30-015-30239 BARCLAY FE<br>14. I hereby certify that the foregoing<br>14. Name (Printed/Typed) CCC<br>Name (Printed/Typed) TERRY E   | DERAL #010 Oil Federal A<br>s true and correct.<br>Electronic Submission #<br>For LINN OPERA<br>mmitted to AFMSS for proc<br>CALLAHAN<br>Submission) | Active<br>238098 verified<br>TING INCORPO<br>essing by ANG  | by the BLM Wel<br>RATED, sent to<br>EL MAYES on 0<br>Title REG CC<br>Date 03/07/20 | Informatic<br>the Carlsb<br>5/02/2014 (1<br>DMPLIANC<br>CEPTE     | RECEIVED<br>ad<br>44<br>44XM0025SE)<br>E SPECIALISF HIO<br>D FOR RECO |   |
|   | 30-015-29787 BARCLAY FE<br>30-015-30239 BARCLAY FE<br>14. I hereby certify that the foregoing<br>14. Name (Printed/Typed) CCC<br>Name (Printed/Typed) TERRY E   | DERAL #010 Oil Federal A<br>s true and correct.<br>Electronic Submission #<br>For LINN OPERA<br>mmitted to AFMSS for proc                            | Active<br>238098 verified<br>TING INCORPO<br>essing by ANG  | by the BLM Wel<br>RATED, sent to<br>EL MAYES on 0<br>Title REG CC<br>Date 03/07/20 | I Informatic<br>the Carlsb<br>5/02/2014 (1<br>DMPLIANC<br>CCEPTE  | RECEIVED<br>ad<br>44<br>44XM0025SE)<br>E SPECIALISF HIO<br>D FOR RECO |   |

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

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## Additional data for EC transaction #238098 that would not fit on the form

## 32. Additional remarks, continued

30-015-29828 BARCLAY FEDERAL #012 Oil Federal Active 30-015-30090 BARCLAY FEDERAL #013 Oil Federal Active 30-015-30065 BARCLAY FEDERAL #014 Oil Federal Active 30-015-30238 BARCLAY FEDERAL #017 Oil Federal Active 30-015-30820 BARCLAY FEDERAL #018 Oil Federal Active 30-015-30821 BARCLAY FEDERAL #019 Oil Federal Active 30-015-30821 BARCLAY FEDERAL #020 Oil Federal Active 30-015-30766 BARCLAY FEDERAL #020 Oil Federal Active 30-015-3054 BARCLAY FEDERAL #021 Oil Federal Active 30-015-30597 BARCLAY FEDERAL #022 Oil Federal Active 30-015-30883 BARCLAY FEDERAL #025 Oil Federal Active 30-015-30883 BARCLAY FEDERAL #027 Oil Federal Active 30-015-33655 BARCLAY FEDERAL #029 Oil Federal Active

## Barclay Federal 2 30-015-29683 Linn Operating Incorporated February 10, 2015 Conditions of Approval

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. Include meter serial number on sundry.

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 to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).

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.

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