

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION

ARTESIA DISTRICT

SEP 23 2016

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.
NMLC029419A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
SKELLY UNIT 529. API Well No.
30-015-0534510. Field and Pool, or Exploratory
GRAYBURG JACKSON:SR-Q-G-S11. County or Parish, and State
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION2. Name of Operator
LINN OPERATING, INC.Contact: NANCY FITZWATER
E-Mail: nfitzwat@linnenergy.com3a. Address
600 TRAVIS ST., SUITE 5100
HOUSTON, TX 770023b. Phone No. (include area code)
Ph: 281-840-4266

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

Sec 22 T17S R31E Mer NMP NWSE 1980FSL 1980FEL

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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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	

8-25-16

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 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.)

LINN RESPECTFULLY SUBMITS FOR YOUR REVIEW AND APPROVAL SUBSEQUENT PLUG AND ABANDONMENT OPERATIONS SUMMARY AS FOLLOWS:

08.18.16 MIRU PLUGGING EQUIP.

08.22.16 ND WELLHEAD, NU BOP. POOH W/AD-1-5 11/2 PKR. POOH W/96 JTS TBG. SET CIBP @ 2963'. CIRC HOLE W/70 BBLs MLF. PRESSURE TESTED CSG. HELD 500 PSI. GOOD TEST. SPOTTED 25 SXS CMT @ 2963'-2714'. (APPROVED BY YOLANDA JORDAN W/BLM)

08.23.16 SPOTTED 25 SXS CMT @ 2385'-2138'. WOC, TAG'D PLUG @ 2212'. PERF'D CSG @ 1640'. PKR WOULD NOT SET. SPOTTED 40 SXS CMT @ 1621'-1226' (APPROVED BY YOLANDA JORDAN W/BLM). WOC.

08.24.16 TAG'D PLUG @ 1308'. PERF'D CSG @ 715'. SQZ'D 50 SXS CMT & DISPLACED TO 512'. WOC. TAG'D PLUG @ 543'. PERF'D CSG @ 200'. PRESSURED UP. SPOTTED 25 SXS CMT @ 254' & CIRC TO SURF.

08.25.16 DUG OUT CELLAR, CUT OFF WELLHEAD, TOP'D OFF 5-1/2" & 8-5/8" ANNULUS W/30 SXS CMT

*Reclamation Due 2-25-17*Accepted as to plugging of the well bore.
Liability under bond is retained until

Surface restoration is completed.

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

Electronic Submission #349716 verified by the BLM Well Information System
For LINN OPERATING, INC., sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH MCKINNEY on 08/31/2016.()

Name (Printed/Typed) NANCY FITZWATER

Title REGULATORY SUPERVISOR

Signature (Electronic Submission)

Date 08/31/2016

Accepted for record
NMOCD
R. L. B.*Accepted For Record*

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

SPE

Date

8-9-16

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

CFD

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 **