Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT 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.					FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM98120 6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No. NMNM71030A			
I. Type of Well Gas Well Other: INJECTION					8. Well Name and No. SKELLY UNIT 35			
2. Name of Operator LINN OPERATING, INC. Contact: NANCY S FITZWATER E-Mail: NFITZWATER@LINNENERGY.COM					9. API Well No. 30-015-10773			
3a. Address 600 TRAVIS ST. SUITE 1400 HOUSTON, TX 77002		Phone No. (include area code) : 281-840-4266 : 281-840-4003			10. Field and Pool or Exploratory Area GRAYBURG JACKSON 7 RIVERS			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State			
Sec 14 T17S R31E Mer 6PM SWSE 660FSL 1980FEL					EDDY COUNTY, NM			
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICATE 1	NATURE O	F NOTICE, R	EPORT, OR	OTHER	DATA	
TYPE OF SUBMISSION	TYPE OF ACTION							
□ Notice of Intent	🗖 Acidize	🗖 Deepen	Deepen		Production (Start/Resume)		□ Water Shut-Off	
—	Alter Casing	Hydraulic Fracturing		Reclamation			Well Integrity	
Subsequent Report	Casing Repair			🗖 Recomple	•		Other	
Final Abandonment Notice	 Change Plans Convert to Injection 			Temporar Water Dis	orarily Abandon			
If the proposal is to deepen direction Attach the Bond under which the wo following completion of the involvec testing has been completed. Final Al determined that the site is ready for f LINN RESPECTFULLY SUBM UP AND RETURNED TO INJ THIS WELL SHOULD NOW E	rk will be performed or provide operations. If the operation re bandonment Notices must be fil inal inspection. MITS FOR YOUR REVIEV ECTION ON JANUARY 2	the Bond No. on file sults in a multiple con led only after all require N AND APPROVA 27, 2017.	with BLM/BIA apletion or reco rements, includ	A. Required subso ompletion in a nev ling reclamation, THAT THE RE	equent reports mu w interval, a Forn have been comple EFERENCED L CONSER	ist be filed in 3160-4 m eted and the WELL W	within 30 days ust be filed once e operator has AS CLEANED	
Accepted for record					ARTESIA DISTRICT			
NMOCD RI APR 1 7 2017								
			4/25/1	7	RECEIVE	>		
14. I hereby certify that the foregoing is	# Electronic Submission For LINN C	PERATING, INC.,	sent to the C	arlsbad		<u> </u>		
Committed to AFMSS for processing by DEBORAH MCKINNEY on 02/07/2017 () Name (Printed/Typed) NANCY S FITZWATER Title REGULATORY SUPERVISOR								
Signature (Electronic	Submission)	Dat		EP,TED F	OR REC	ORD		
	THIS SPACE FO	OR FEDERAL C	RSTATE	OFFICE US	E			
Approved By Conditions of approval, if any, are attache certify that the applicant holds legal or eq which would entitle the applicant to condu Title 18 U.S.C. Section 1001 and Title 43 States any folce fortitions or foundated	uitable title to those rights in the ict operations thereon. U.S.C. Section 1212, make it a	e subject lease Of crime for any person	fice BUF knewingly and	APR 1 JUK Jur REAU OF LAN			Date — y of the United	
States any false, fictitious or fraudulent	statements or representations as	to any matter within	its jurisaiction.					

(Instructions on page 2) ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **