

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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

|                                                                                                                                             |                                                                           |                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION |                                                                           | 5. Lease Serial No.<br>NMLC029435B                        |
| 2. Name of Operator<br>LINN OPERATING INC                                                                                                   |                                                                           | 6. If Indian, Allottee or Tribe Name                      |
| Contact: NANCY FITZWATER<br>E-Mail: nfitzwat@linnenergy.com                                                                                 |                                                                           | 7. If Unit or CA/Agreement, Name and/or No.               |
| 3a. Address<br>600 TRAVIS, STE 5100<br>HOUSTON, TX 77002                                                                                    | 3b. Phone No. (include area code)<br>Ph: 281-840-4266<br>Fx: 281-840-4006 | 8. Well Name and No.<br>KEEL "B" 14                       |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 5 T17S R31E 660FSL 660FEL                                     |                                                                           | 9. API Well No.<br>30-015-05079                           |
|                                                                                                                                             |                                                                           | 10. Field and Pool, or Exploratory<br>GRAYBURG JACKSON    |
|                                                                                                                                             |                                                                           | 11. County or Parish, and State<br>EDDY COUNTY COUNTY, NM |

**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 checked="" 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 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 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.)

Notice that we have returned this well to production  
Re-delivery:

4-13-11 Well is injecting @ 17 PSI, cleaned out screen. Choked injection rate to 176BPD, tbg psi @ 1725.

**If well goes off production for more than  
30 days notify BLM by Sundry within  
5 business days**

Accepted for record  
NMOCD/F  
5/25/11

**RECEIVED**  
MAY 17 2011  
NMOCD ARTESIA

**ACCEPTED FOR RECORD**

MAY 12 2011  
*J. M. Hutto*  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

|                                                                                                                                                                                          |                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| 14. Thereby certify that the foregoing is true and correct.<br>Electronic Submission #106836 verified by the BLM Well Information System<br>For LINN OPERATING INC, sent to the Carlsbad |                       |
| Name (Printed/Typed) TAMMY SCARBOROUGH                                                                                                                                                   | Title FIELD ADMIN III |
| Signature (Electronic Submission)                                                                                                                                                        | Date 04/21/2011       |

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE***RFB* 04/27/2011

|                                                                                                                                                                                                                                                           |             |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------|
| Approved By _____                                                                                                                                                                                                                                         | Title _____ | 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 those 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 \*\***