

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 October 13, 2009

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

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|--|
| WELL API NO.<br>30-015-20468   |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.   |
| 7. Lease Name or Unit Agreement Name<br>SKELLY UNIT  |
| 8. Well Number: 109  |
| 9. OGRID Number 269324   |
| 10. Pool name or Wildcat<br>GRAYBURG JACKSON;SR-Q-G-SA   |

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other **INJECTION**

2. Name of Operator  
LINN OPERATING, INC.

3. Address of Operator  
600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002

4. Well Location  
 Unit Letter E: 1980 feet from the N line and 660 feet from the W line  
 Section 15 Township 17S Range 31E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3863'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

|  |   |  |  |
|--|---|--|--|
| <b>NOTICE OF INTENTION TO:</b>                 |   | <b>SUBSEQUENT REPORT OF:</b>   |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                                 | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>                       | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>                             |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |   |  |  |
| OTHER: <input type="checkbox"/>                |   | OTHER: <b>6 MONTH TA EXTENSION</b> <input checked="" type="checkbox"/> |  |

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

LINN politely requests a 6 month TA extension for the Skelly Unit 109 injection well. The TA status is set to expire on 4/2/2012 and LINN is requesting an extension of the TA approval until 10/2/2012. The TA extension request is simply to allow LINN sufficient time to obtain management approval to return the well to active injection and to allow sufficient time for a rig to move to location to complete the work. LINN will submit a NOI to return this well to active injection or P&A by 4/1/2012. The reservoir and workover evaluation has been complete and is in the process of internal approval. This well is an important piece of the flood pattern in the Skelly Unit as shown on the attached contour maps. LINN expects this well to provide injection support for two offset wells, Skelly Unit 180 and Skelly Unit 189.

Spud Date: Temporary Abandoned/Status Approved  
 Until 10/2/2012 Rig Release Date: \_\_\_\_\_

**RECEIVED**  
 MAR 23 2012  
 NMOCD ARTESIA

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Terry Callahan TITLE: REGULATORY SPECIALIST III DATE MARCH 22, 2012

Type or print name TERRY B. CALLAHAN E-mail address: tcallahan@linnenergy.com PHONE: 281-840-4272  
**For State Use Only**

APPROVED BY: Richard Inoue TITLE COMPLIANCE OFFICER DATE 3/28/12  
 Conditions of Approval (if any): \_\_\_\_\_