

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Carlsbad Field Office

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

Case Serial No.
NMNM27276

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator LINN OPERATING INCORPORATED Contact: DILLON A SALAS E-Mail: apollo.salas44@gmail.com	7. If Indian, Allottee or Tribe Name	8. Well Name and No. MCCLAY 12
3a. Address 600 TRAVIS STREET SUITE 5100 HOUSTON, TX 77002	3b. Phone No. (include area code) Ph: 575-492-1236 Fx: 575-492-1237	9. API Well No. 30-015-23125-00-S1	10. Field and Pool or Exploratory Area N BENSON
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 33 T18S R30E NWSW 1980FSL 660FWL		11. County or Parish, State EDDY COUNTY, NM	

12. CHECK THE 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"/> Hydraulic Fracturing	<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 recomplete 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

10-07-18 TO 10-09-18

- Decided to PBOP.
- RU WSU.
- POH w/ Rods, pump, and tbg.
- Hydrotested tbg. Replaced 4jts.
- 500 gallons 15% dump acid.
- Ran rods/pump.
- Return well to production. 2bopd and 1bwpd.

Gc 2/19/19
Accepted for record NMOCD

**NM OIL CONSERVATION
ARTESIA DISTRICT**

FEB 08 2019

RECEIVED

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

Electronic Submission #450607 verified by the BLM Well Information System
For LINN OPERATING INCORPORATED, sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 01/29/2019 (19PP0769SE)

Name (Printed/Typed) MERCH MERCHANT	Title PROJECT MANAGER
Signature (Electronic Submission)	Date 01/15/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	FEB 01 2019 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 _____	/s/ Jonathon Shepard

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.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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5. Lease Serial No. **NM 27276**

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator **POGO OIL & GAS OPERATING, INC**

3a. Address **1515 CALLE SUR, SUITE 174
HOBBS, NM 88240**

3b. Phone No. (include area code)
(575) 492-1236

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC 33 T18S R30E 1980FSL 660FWL

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

8. Well Name and No. **MCCLAY FEDERAL #012**

9. API Well No. **30-015-23125**

10. Field and Pool or Exploratory Area
N BENSON

11. Country or Parish, State
EDDY COUNTY, NM

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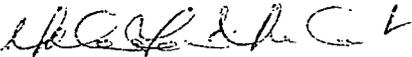
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14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
M.Y. Merchant

Title **Project Manager**

Signature 

Date **01/14/2019**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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Office

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