Submit 1 Copy To Appropriate District	State of	State of New Mexico				Form C-103		
Office District I - (575) 393-6161 Energy, Minerals and Natural Resources				October 13, 2009				
1625 N. French Dr., Hobbs, NM 88240					WELL API NO. 30-025-28685			
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 RECORDERVATION DIVISION					5. Indicate Type of Lease			
District III - (505) 334-6178 1220 South St. Francis Dr.				STATE STATE FEE				
1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 FEB 0 2 2012Santa Fe, NM 87505				6. State Oil & Gas Lease No.				
1220 S. St. Francis Dr., Santa Fe, NM								
87505 HOHES ON WELLS					7 Leace Name or	I Init Ameemen	t Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					7. Lease Name or Unit Agreement Name			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH					SEVEN RIVERS	OUEEN UNIT		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJECTION					8. Well Number: 064			
2. Name of Operator					9. OGRID Number 269324			
LINN OPERATING, INC.					7. COMB Number 20/324			
3. Address of Operator					.10. Pool name or Wildcat			
600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002					LANGLIE MATTIX; 7 RVRS-Q-			
					GRAYBURG			
4. Well Location			•					
Unit Letter E	3:2310 feet from the	<u>N</u>	line and	66	feet from	the W	line	
Section 02	Township	238	Range	36E	NMPM	LEA (County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)								
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE						SING 🗌		
OTHER: T&A ONE YEAR EX	TENSION REQUESTED	\boxtimes	OTHER:				П	
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 WOULD LIKE TO REQUEST A ONE YEAR EXTENSION ONLY FOR THE T&A OF THE SRQU #064.								
Condition of Approval: notify								
Spud Date: Rig Release Date:					D Hobbs office 24 hours			
Space Date.		Kelease De		rior o	frunning MIT	Test & Chai	rt	
			•		,			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.								
1.								
SIGNATURE (LUANA) TITLE: REGULATORY SPECIALIST III DATE FEBRUARY 2, 2012								
Type or print name TERRY B. CALLAHAN E-mail address: tcallahan@linnenergy.com PHONE: 281-840-4272								
For State Use Only								
APPROVED BY: DATE 2-2-2017 Conditions of Approval (if any):								
Conditions of Approval (it dity).								