Submit I 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 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013 87505 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013 Santa Fe, NM 87505   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Santa Fe, NM'JUL 0 8 2013   I220 S. St. Francis Dr., Super Source Proposals, Poperator   II. Type of Well: Oil Well Gas Well Other INJECTION   I. Name of Operator   IINN OPERATING, INC.   3. Address of Operator   600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002	Form C-103   October 13, 2009   WELL API NO.   30-025-33874   5. Indicate Type of Lease   STATE FEE   FEE FED   6. State Oil & Gas Lease No.   7. Lease Name or Unit Agreement Name   MALJAMAR GRAYBURG UNIT   8. Well Number: 155   9. OGRID Number 269324   10. Pool name or Wildcat   MALJAMAR;GRAYBURG-SAN   ANDRES
4. Well Location Unit Letter F; 1880 feet from the N line and 208	0 feet from the <u>W</u> line
Section 10 Township 17S Range 32H	E NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,159' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   PERFORM REMEDIAL WORK PLUG AND ABANDON   TEMPORARILY ABANDON CHANGE PLANS   PULL OR ALTER CASING MULTIPLE COMPL   DOWNHOLE COMMINGLE MULTIPLE COMPL	
OTHER: OTHER: FOR A PREVIOUSLY FAILED MIT Image: Complete and the second	
6/24/2013 – Spoke to Maxey Brown (OCD) and ran MIT chart (not witnessed) START 520#, FINAL 462#, TIME 36-MIN TOTAL. 520# 485 ECG ECG	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledg SIGNATURE AUCANON TITLE: <u>REG COMPLIANCE SI</u>	e and belief. PECIALIST III DATE JULY 5, 2013
Type or print name <u>TERRY B. CALLAHAN</u> E-mail address: <u>tcallahan@linnenerg</u>	y.com PHONE: <u>281-840-4272</u>
For State Use Only APPROVED BY TITLE DIST. MGR	DATE 7- 9- 20-13
Conditions of Approval (if any);	JUL 0 9 2013

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