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Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	gy, Minerals and Natural Resources	October 13, 2009 WELL API NO.
<u>District II</u> - (575) 748-1283	CONSERVATION DIVISION	30-025-11982
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 APR 0 1 2111	1220 South St. Francis Dr.	5. Indicate Type of Lease
	Santa Fe, NM 87505	STATE FEE FED 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		o. State on de Ous Dease No.
SUNDRY NOTICES AND	REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRI	LL OR TO DEEPEN OR PLUG BACK TO A	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PROPOSALS.)	PERMIT" (FORM C-101) FOR SUCH	SOUTH LEONARD UNIT
1. Type of Well: Oil Well 🔲 Gas Well	Other INJECTION	8. Well Number: 001
2. Name of Operator		9. OGRID Number 269324
LINN OPERATING, INC. 3. Address of Operator		10. Pool name or Wildcat
600 TRAVIS, SUITE 5100, HOUSTON, TEX	AS 77002	LEONARD;QUEEN, SOUTH
		·
4. Well Location	and the Colling and	1090 for the W line
Unit Letter <u>N; 660</u> feet fr Section 13	rom the <u>S</u> line and Township 26S Range	<u>1980</u> feet from the <u>W</u> line 37E NMPM LEA County
	tion (Show whether DR, RKB, RT, GR,	
3000'		
12. Check Appropriat	e Box to Indicate Nature of Noti	ce, Report or Other Data
NOTICE OF INTENTIO		UBSEQUENT REPORT OF:
	ID ABANDON	
TEMPORARILY ABANDON		DRILLING OPNS.
		IENT JOB
OTHER:	OTHER:	5 YR MIT 🛛
		, and give pertinent dates, including estimated date
of starting any proposed work). SEE R proposed completion or recompletion.	CULE 19.15.7.14 NMAC. For Multiple	Completions: Attach wellbore diagram of
proposed compression or recompression		
PLEASE FIND ATTACHED 2014 FIVE YEAR MIT TEST		
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Spud Date:	Rig Release Date:	
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I hereby certify that the information above is tru	ie and complete to the best of my know	ledge and belief.
Killaho		
SIGNATURE CALLON CAL	TITLE: <u>REG COMPLIANCE S</u>	PECIALIST III DATE MARCH 31, 2014
Type or print name TERRY B. CALLAHAN	E-mail address: tcallahan@	DUONE 281 840 4373
For State Use Only	E-man address. <u>Icananan(u</u>	<u>PHONE: 281-840-4272</u>
Sond		
APPROVED BY: Conditions of Approval (if any):	K_TITLE_Stuff_Ma	Nag & DATE 4.3.14

Conditions of Approval (if any):

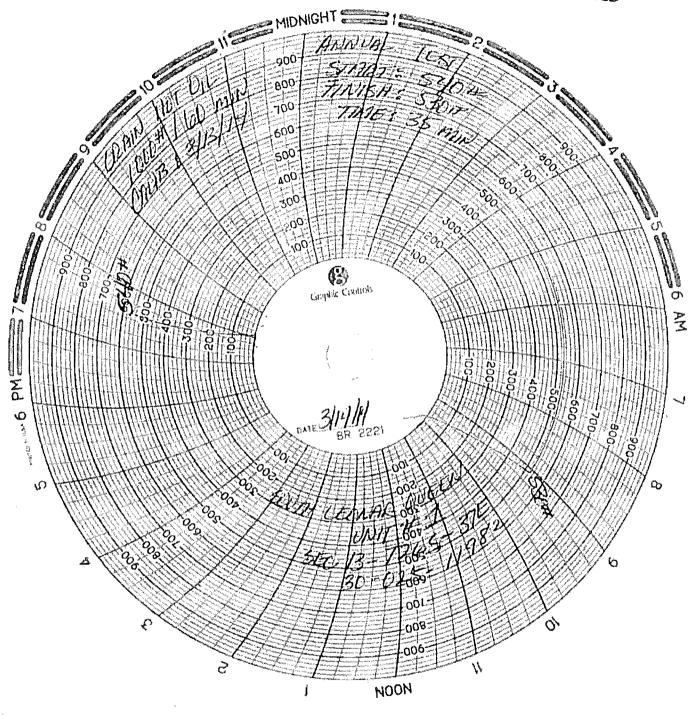
MPR 2 1 2014

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HOBBS OCD

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