Submit I Copy To Appropriate District State of New Mexico	Form C-103
Office	D
1625 N. French Dr., Hobbs NW 88240	WELL API NO.
District II – (575) 748-1839 811 S. First St., Artesia, NM 882105 OIL CONSERVATION DIVISION	5 Indicate Type of Lease
District III - (505) 334-6178 1220 South St. Francis Dr.	STATE X FEE
1000 Rio Brazos Rd., Aztec, WM 87410 District IV = (505) 476-3460 Santa Fe, NM 87505,	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. Francis Dr., Sanja Fe, National St. 1220 S. St. 1220 S	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FÖR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	CAPROCK MALJAMAR UNIT
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well Gas Well X Other INJECTION	8. Well Number 054
2. Name of Operator LINN OPERATING, INC.	9. OGRID Number 269324
3. Address of Operator	10. Pool name or Wildcat
600 TRAVIS STREET, STE. 5100, HOUSTON, TX 77002	MALJAMAR; GRAYBURG -SAN ANDRES
4. Well Location	
Unit Letter E: 1980 feet from the N line and 66	rect from theme
Section 20 Township 178 Range 33E	NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4205' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	LING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	JOB
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM	MIT & BRADENHEAD TEST X
13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Conproposed completion or recompletion.	
PLEASE SEE THE ATTACHED BRADENHEAD TEST REPORT AND PASSED M	IT CHART FOR THE ABOVE MENTIONED WEL
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge	and belief.
all a Bla	- Curve
SIGNATURE / TITLE Reg. Compl. Spec. 2	DATE2/11/15
Type or print name Alex Bolanos E-mail address: abolanos@linner	nergy.com PHONE: 281-840-4352
For State Use Only	
APPROVED BY: Bel Somanah TITLE Stuff Manage	DATE 2/18/2015
Conditions of Approval (if any):	DATE 9101 4V.0

