

HOBBSOCD

Submit 1 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 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

Revised July 18, 2013

FEB 13 2015

RECEIVED

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.
30-025-07943 ✓

5. Indicate Type of Lease

STATE ☒ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

EAST HOBBS SAN ANDRES UNIT

8. Well Number 715 ✓

9. OGRID Number

269324

10. Pool name or Wildcat

HOBBS; SAN ANDRES, EAST

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other INJECTION

2. Name of Operator

LINN OPERATING, INC.

3. Address of Operator

600 TRAVIS STREET, STE. 5100, HOUSTON, TX 77002

4. Well Location

Unit Letter N : 660 feet from the S line and 2103 feet from the W lineSection 29 Township 18S Range 39E NMPM LEA County11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3597' 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 ☐CLOSED-LOOP SYSTEM ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: MIT & BRADENHEAD TEST ☒

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.

PLEASE SEE THE ATTACHED BRADENHEAD TEST REPORT AND FAILED MIT CHART FOR THE ABOVE MENTIONED WELL.

) Letter of Intent (PT)
2/19/2015 BS/OCD

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE Reg. Compl. Spec. 2

DATE 2/10/15

Type or print name Alex Bolanos

E-mail address: abolanos@linenergy.com

PHONE: 281-840-4352

For State Use Only

APPROVED BY:

TITLE

Staff Manager

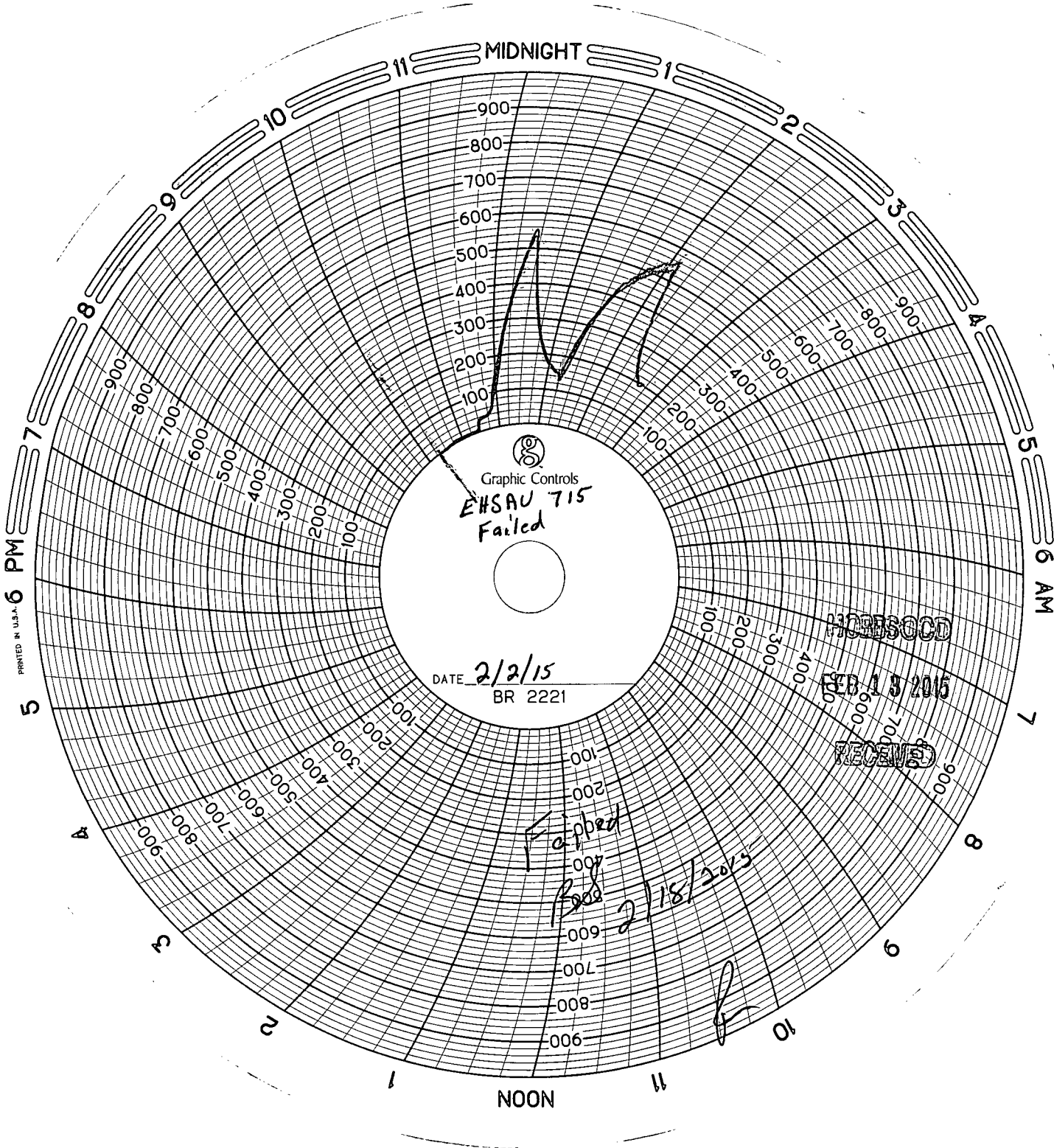
DATE

2/18/2015

Conditions of Approval (if any):

FEB 24 2015

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