

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

WELL API NO.

30-025-33454

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

MALJAMAR GRAYBURG UNIT

8. Well Number 153

9. OGRID Number 269324

10. Pool name or Wildcat  
MALJAMAR;GRAYBURG-SAN  
ANDRES

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, SUITE 5100, HOUSTON, TEXAS 77002

4. Well Location

Unit Letter N : 672 feet from the S line and 2162 feet from the W line

Section 04 Township 17S Range 32E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4120' GL

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: ☐

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.

During a field review, found top joint needing replacement due to corrosion. MIRU, replace top joint and put back on injection.

Spud Date:

SUBJECT TO LIKE  
APPROVAL BY BLM

Rig Release Date:

Condition of Approval: notify

OCD Hobbs office 24 hours

prior of running MIT Test & Chart

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

SIGNATURE

*Laura A. Moreno*

TITLE REG COMPLIANCE ADVISOR DATE 08-03-2015

Type or print name LAURA A. MORENO E-mail address: lmoreno@linnenergy.com PHONE: 713-904-6657

For State Use Only

APPROVED BY:

*Mary Brown*

TITLE

*Dist Supervisor*

DATE

*8/4/2015*

Conditions of Approval (if any):

AUG 06 2015

MB