

HOBBS OCD

MAY 27 2016

RECEIVED

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name LINN OPERATING	*API Number 30-025-09239
Property Name SEVEN RIVERS QUEEN UNIT	Well No. 52

1. Surface Location

UL - Lot H	Section 3	Township 23S	Range 36E	Feet from 1980	N/S Line N	Feet from 660	E/W Line E	County LEA
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Well Status

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/>	SWD	OIL	PRODUCER	GAS	DATE 2/19/16
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OBSERVED DATA

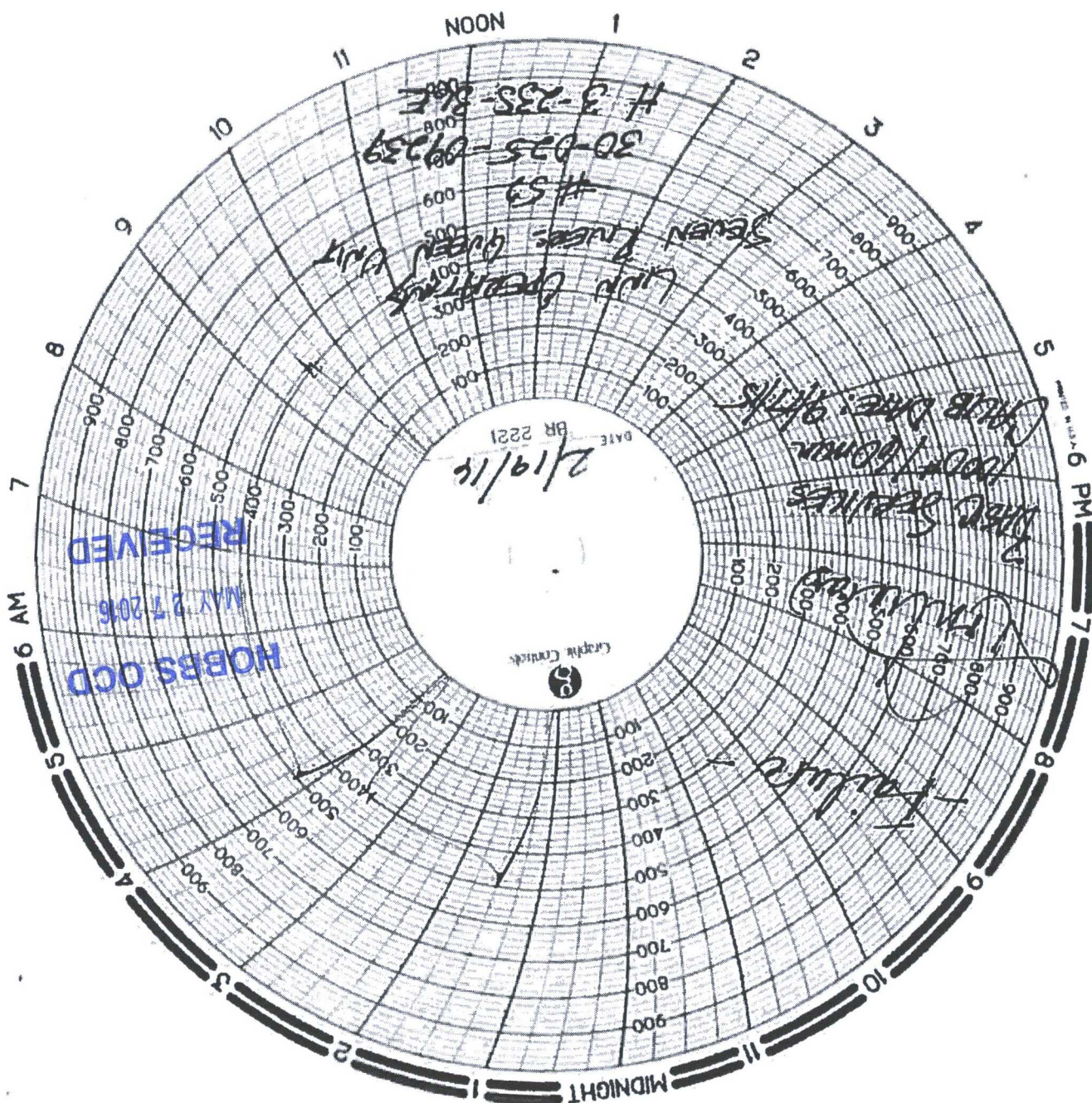
	(A) Surface	(B) Interval (1)	(C) Interval (2)	(D) Prod. Cons.	(E) Testing
Pressure	0			0	0
Flow Characteristics					
Pull	Y/N	Y/N	Y/N	Y/N	CO2 —
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR —
Surges	Y/N	Y/N	Y/N	Y/N	GAS —
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of Fluid Injected or Withdrawn if applies.
Gas or Oil	Y/N	Y/N	Y/N	Y/N	
Water	Y/N	Y/N	Y/N	Y/N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Failure

Signature: <i>Contreiras</i>	OIL CONSERVATION DIVISION
Printed name: JUNIOR CONTRERAS	Entered into RBDMS
Title: PRODUCTION SPECIALIST	Re-test <i>[Signature]</i>
E-mail Address: j.contreiras@linnenergy.com	
Date: 2/19/2016	
Phone: 575/904-0031	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM



HOBBS OCD

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

MAY 27 2016

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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.)		WELL API NO. 30-025-09239
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator LINN OPERATING, INC.		6. State Oil & Gas Lease No.
3. Address of Operator 600 TRAVIS, SUITE 5100, HOUSTON, TEXAS 77002		7. Lease Name or Unit Agreement Name SEVEN RIVERS QUEEN UNIT
4. Well Location Unit Letter <u>H</u> :1980 feet from the <u>N</u> line and <u>660</u> feet from the <u>E</u> line Section <u>03</u> Township <u>23S</u> Range <u>36E</u> NMPM <u>LEA</u> County		8. Well Number 052
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 269324
10. Pool name or Wildcat LANGLIE MATTIX;7 RVRS-Q-GRAYBURG		

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: ☒ FAILED MIT

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐
 OTHER: ☐ PASSED MIT 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.

Due to the Failed 5-Year MIT, LINN Operating Inc. respectfully requests to MIRU on this well to identify the failure. 24 Hour notice will be provided to the NMOCD prior to MIRU. Please see attached Failed MIT and Braden Head Test.

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

Laura A. Moreno

TITLE REGULATORY ADVISOR DATE 3-2-2016

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

r State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):