Office <u>District I</u> – (575) 393-6161	State of New Mexico	Form C-103
	Energy, Minerals and Natural Resources	Revised July 18, 2013
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 8820 EBS District II – (575) 748-1283		WELL API NO. 30-025-01458
811 S First St Artesia NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 APR 1 0 1000 Rio Brazos Rd., Aztec, NM 87410	2017 1220 South St. Francis Dr.	STATE S FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, FCEI	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
67303	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	TO DRILL OR TO DEEPEN OR PLUG BACK TO A ON FOR PERMIT" (FORM C-101) FOR SUCH	CAPROCK MALJAMAR UNIT
	Well Other INJECTION	8. Well Number 28
2. Name of Operator LINN OPERATING, INC.		9. OGRID Number 269324
3. Address of Operator	TON TEXAS 55000	10. Pool name or Wildcat
600 TRAVIS ST., SUITE 1400 HOUS	ION, IEXAS 7/002	MALJAMAR;GRAYBURG-SAN ANDRES
4. Well Location		
Unit Letter P : 660	feet from the SOUTH line and 660	feet from the <u>WEST</u> line
Section 18	Township 17S Range 33E	NMPM <u>LEA</u> County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
12. Check Appr	opriate Box to Indicate Nature of Notice,	, Report or Other Data
NOTICE OF INTER	NTION TO: SUE	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐		
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐		
	JLTIPLE COMPL CASING/CEMEN	IT JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
CLOSED-LOOP SYSTEM  OTHER:	☐ OTHER: MIT CH	ART FILING
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 recompl	etion.	
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ON 3-22-17. STARTING PRESSURE V	VAS 390#, ENDING PRESSURE WAS 390#.  Rig Release Date:	ge and belief.
Spud Date:  I hereby certify that the information above SIGNATURE  Type or print name NANCY FITZWAT	Rig Release Date:	ge and belief.  EVISOR DATE APRIL 5, 2017.
Spud Date:  I hereby certify that the information above SIGNATURE Managed 17	Rig Release Date:  e is true and complete to the best of my knowledge TITLE REGULATORY SUPER  ER E-mail address: nfitzwater@linnenergy.com	ge and belief.  EVISOR DATE APRIL 5, 2017.  PHONE: 281-840-4266
Spud Date:  I hereby certify that the information above SIGNATURE  Type or print name NANCY FITZWAT	Rig Release Date:  e is true and complete to the best of my knowledge to the best of m	ge and belief.  EVISOR DATE APRIL 5, 2017.  PHONE: 281-840-4266

