

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

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. 30-025-01479

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name

CAPROCK MALJAMAR UNIT

8. Well Number 39

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 ST., SUITE 1400 HOUSTON, TEXAS 77002

4. Well Location

Unit Letter B : 660 feet from the NORTH line and 1980 feet from the WEST line  
Section 19 Township 17S Range 33E NMPM LEA County

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

## 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 CHART 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 recompletion.LINN RESPECTFULLY SUBMITS FOR YOUR REVIEW AND APPROVAL THE ATTACHED MIT WHICH WAS CONDUCTED  
ON 3-22-17. STARTING PRESSURE WAS 370#, ENDING PRESSURE WAS 370#.

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 Nancy Fitzwater TITLE REGULATORY SUPERVISOR DATE APRIL 5, 2017Type or print name NANCY FITZWATER E-mail address: nfitzwat@linnenergy.com PHONE: 281-840-4266

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Officer DATE 4/24/17

Conditions of Approval (if any):



