BI	UNITED STATES EPARTMENT OF THE IN UREAU OF LAND MANAG NOTICES AND REPOR is form for proposals to d II. Use form 3160-3 (APD)	CD OMB NO Expires: Ja 5. Lease Serial No. NMLC059152B					
SUBMIT IN T	TRIPLICATE - Other instru	ctions on page 2	HOBBS	OCD f Unit or CA/Agree	ement, Name and/or No.		
1. Type of Well Gas Well Oth	·	•	JAN 162	2018 8. Well Name and No. CAPROCK MALJ	AMAR UNIT C 103		
2. Name of Operator LINN OPERATING,LLC	Contact: M E-Mail: MKOTESKY	INDY K KOTESKY @LINNENERGY.COM	RECEIV	9. API Well No. 30-025-01385			
3a. Address 600 TRAVIS, SUITE 1400 HOUSTON, TX 77002	3b. Phone No. (include Ph: 281-840-4208	area code)		10. Field and Pool or Exploratory Area MALJAMAR:GRAYBURG-SAN AND			
4. Location of Well <i>(Footage, Sec., T</i> Sec 33 T17S R33E Mer 6PM				11. County or Parish, State LEA COUNTY COUNTY, NM			
12. CHECK THE AI	PPROPRIATE BOX(ES) T	O INDICATE NAT	URE OF NOT	TICE, REPORT, OR OTH	IER DATA		
TYPE OF SUBMISSION							
 Notice of Intent Subsequent Report Final Abandonment Notice 	 Acidize Alter Casing Casing Repair Change Plans 	 Deepen Hydraulic Fr New Constru Plug and Aba 	acturing ction Re	roduction (Start/Resume) eclamation ecomplete emporarily Abandon	 □ Water Shut-Off □ Well Integrity ⊠ Other Venting and/or Flari 		
	Convert to Injection	Plug Back		ater Disposal	ng		
 13. Describe Proposed or Completed Op If the proposal is to deepen direction: Attach the Bond under which the wor following completion of the involved testing has been completed. Final Al determined that the site is ready for f LINN OPERATING, LLC SUB LINN'S MONTHLY FLARE VC SEPT 2017 - 466 MCF OCT 2017 - 196 MCF NOV 2017 - 0 MCF PLEASE ROUTE TO THE CA LEASE NUMBER. THANK YOU 14. I hereby certify that the foregoing is 	ally or recomplete horizontally, gi rk will be performed or provide th l operations. If the operation resul pandonment Notices must be filed inal inspection. MITTED AN NOI TO FLAR DLUMES DURING THE RE	ve subsurface locations e Bond No. on file with ts in a multiple complet only after all requireme E THE CAPROCK I QUESTED PERIOD IE SYSTEM IS NO	Ind measured and BLM/BIA. Requi- ion or recompletion nts, including recla MALJAMAR UN D ARE AS FOLD	true vertical depths of all pertin red subsequent reports must be n in a new interval, a Form 316 umation, have been completed a NIT C FROM 9-5-17 TO 1 LOWS: THE CARLSBAD OFFIC	ent markers and zones. filed within 30 days 0-4 must be filed once nd the operator has 1-4-17.		
Electronic Submission #398340 verified by the BLM Well Information System For LINN OPERATING,LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 12/20/2017 () Name(Printed/Typed) MINDY K KOTESKY Title REGULATORY SPECIALIST I							
Signature (Electronic S	Submission)	Date	12/18/2017	CEPTED FOR/RE	CORD		
	THIS SPACE FOR	R FEDERAL OR S	STATE OFFIC	LAN AL dasa	A		
Approved By							
States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.							
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** Accepted for Record Only WSB/OCD 1/18/2018							

Caprock Maljamar Unit

Battery	API	Well Name	Well Number	Туре	Lease	Status
С	30-025-01385	CAPROCK MALIAMAR UNIT	#103	Oil	Federal	Active
С	30-025-34257	CAPROCK MALJAMAR UNIT	#285	Oil	Federal	Active