<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Energy, Minerals and Natural R OIL CONSERVATION DIV 1220 South St. Francis Santa Fe, NM 87505	VISION 5. Indicate 7 STAT	55	V
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BA CATION FOR PERMIT" (FORM C-101) FOR SU Gas Well Other INJECTION	ACK TO A CH ROCK QUE 8. Well Nur	nber 310	-
3. Address of Operator PO BOX 5375, Midland, TX 797		10. Pool nar	ne or Wildcat JEEN	
4. Well Location Unit Letter N : 660 Section 24 Townsh	feet from the S line <b>RECEIV</b> ip 13S Range 31E 11. Elevation <i>(Show whether DR, RKI</i> 4405' GL	EPet from the W line NMPM County	CHAVES	-
12. Check A	ppropriate Box to Indicate Nature	of Notice, Report or Ot		

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL V	NORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE	DRILLING OPNS.	P AND A		
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CE	MENT JOB			
DOWNHOLE COMMINGLE							
OTHER:			OTHER:	RETURN TO PROD	UCTION		
			$\boxtimes$				

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.

7-27-2017

RU on well. Pull packer and tubing. Replace packer, RIH with pkr and tbg. Set pkr @ 3012'. Pressure test

backside (witnessed by NMOCD). Return well to injection. FOR FUTURE REPORTING-C.D.A. - SUBMIT CHART WITH SUBSEQUENT C-103'S mill

hereby certify that the information above is true and complete to the best of my knowledge and belief. Quino TITLE Regulatory Affairs Coordinator DATE: 08/17/2017 SIGNATURE (

	Stream frontier and stream of the stream of	and a second					
Type or print name	Carie Stoker	E-mail address: carie@	stokeroilfield.com	PHONE:	432.664.7659	1	1
APPROVED BY:		Brown TITLE_		-	DATE	8/21	2017
Conditions of Approv	al (if any):					1	

RBDM5 - INSPECTION + CHART V

MЬ

