Submit One Copy To Appropriate District Office	oriate District State of New Mexico			Form C-103			
District I	Energy, Minerals and Natural Resources			Revised November 3, 2011			
1625 N. French Dr., Hobbs, NM 88240 District II	5 N. French Dr., Hobbs, NM 88240 rict II				WELL API NO 30-025-43295		
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION				5. Indicate Type of Lease			
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410				STATE FEE X			
District IV 1220 S. St. Francis Dr., Santa Fe, NM				6. State Oil & Gas Lease No			
87505				PERMIT#221769			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or Unit Agreement Name KINSOLVING 2			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH							
PROPOSALS.) 1. Type of Well: ⊠Oil Well ☐ Gas Well ☐ Other				8. Well Number 001			
2. Name of Operator				9. OGRID Number			
ATOKA OPERATING INC				371356			
3. Address of Operator				10. Pool name or Wildcat			
16200 ADDISON RD, STE 155 ADDISON TX 75001				KING; DEVONIAN, NORTH			
4. Well Location Unit Letter H: 1750 feet	from the N. line and	190 foot fro	m the Cline				
Section 2 Township 13							
	11. Elevation (Show v		County LEA				
	3872 GR	- The tries Dit	MAD, MI, GM, CIC.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data							
NOTICE OF INTI	ENTION TO:		SURS	FOLIENT	REPORT OF:		
NOTICE OF INTENTION TO: SUB: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON REMEDIAL WORL					ALTERING C		
TEMPORARILY ABANDON				_		X	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB							
OTHER:				du for OCD i	nanaatian aftar Di		
	ompliance with OCD	rules and t					
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.							
A steel marker at least 4" in diame	ter and at least 4' abo	ove ground	level has been set in o	concrete. It sh	lows the		
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR							
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR							
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.							
The location has been located on a	00=lv 00 000=lblo to 0	uicinal aucu	nd contain and bug h	aan alaanad af	Call in the tweeth flo	1: and	
The location has been leveled as n other production equipment.	early as possible to of	riginai grou	nu contour and has be	een cleared of	all Junk, trash, flor	w lines and	
Anchors, dead men, tie downs and	risers have been cut	off at least	two feet below groun	d level.			
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed							
ocd rules and the terms of the Operate from lease and well location.	or's pit permit and clo	osure plan.	All flow lines, produc	ction equipme	nt and junk have b	een removed	
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have							
to be removed.)							
All other environmental concerns have been addressed as per OCD rules.							
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.							
If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well							
location, except for utility's distribution							
When all work has been completed, ret	on this form to the a	nnronriate l	District office to school	dule an inches	rtion		
when an work has been completed, rec	divinis ionii to die a	ppropriate	Jisu ici office to selici	date an inspec	tion.		
SIGNATURE Monday	Yund	TITLE	VP-OPERATIONS _		DATE 04/02/	2018	
SIGNATURE 11 10 10 10 10 10 10 10 10 10 10 10 10		_HILE	AL-OLEKATIONS _		DATE_04/02/	2018	
TYPE OR PRINT NAME MONTA SI	EWELL	E-MAIL	: mshsdrill@mcsewo	ell.com	PHONE: 940/668-	1884	
For State Use Only	Θ 1.	σ	260			1. 1- 0	
APPROVED BY:	Witaken	TITLE_	ES		DATE_04	116/2018	