

Submit 1 Copy To Appropriate District Office
 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

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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| 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.) | | WELL API NO. 30-015-46132 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator MATADOR PRODUCTION COMPANY | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 5400 LBJ FREEWAY, STE 1500, DALLAS, TX 75240 | | 7. Lease Name or Unit Agreement Name JACK SLEEPER STATE COM 9 16 23S 28E |
| 4. Well Location Unit Letter <u>M</u> : <u>197</u> feet from the <u>S</u> line and <u>156</u> feet from the <u>W</u> line Section <u>4</u> Township <u>23S</u> Range <u>28E</u> NMPM County <u>EDDY</u> | | 8. Well Number <u>221H</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3014' GR | | 9. OGRID Number 228937 |
| 10. Pool name or Wildcat PURPLE SAGE;WOLFCAMP (GAS) | | |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/> | | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <u>Perforate, fracture treat, produce</u> <input checked="" type="checkbox"/> | |
|--|--|--|--|

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.

Which casing was tested? Open well????

- 11/16/19 Open well or 30 min. casing integrity test to 7206 psi; dropped 133 psi. Good test. WSI awaiting frac ops.
- 12/03/19 OW to frac Wolfcamp formation 10620 - 20532' with 25,953,865 lbs sand in 55 stages.
- 12/30/19 Fracture treatment complete. Well secured, awaiting drillout operations.
- 01/03/20 Open well, bleed off to 0 psi. Begin milling plugs.
- 01/05/20 Finish milling plugs. Well secured and SI awaiting flowback ops. SICP 2800 psi.
- 01/19/20 Open well to flowback on 12/64" positive ck. SICP: 1300 psi. Well begins to produce.

* Requesting tubing installation exception delay to allow for post-fracture pressure to decline, well to clean up and allow for safe installation.

TVD/MD: 10571/20675

Well reached TD 09/13/19

Spud Date: 07/03/19

Rig Release Date: 09/17/19

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Ava Monroe TITLE Sr Regulatory Analyst DATE 03/17/2020

Type or print name Ava Monroe E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218

For State Use Only

APPROVED BY: DENIED TITLE DENIED DATE 4/9/20

Conditions of Approval (if any):