Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393 NM OIL CONSERVATION 1625 N. French Dr., Hobbs, NM 878291A DISTRICT	Minerals and Natural Resources	Revised July 18, 2013 WELL API NO. 30-015-23036
District II - (575) 748-1283	ONSERVATION DIVISION	30-015-43899
District II – (575) 748-1283 811 S. First St., Artesia, NM 8870 CT 1 2016 IL C District III – (505) 334-6178	220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, RECEIVED	Samu 1 o, 1 m o r o o o	
87505	PROPER ON WELLS	316766 7. Lease Name or Unit Agreement Name
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.)		Ann Com 15 24S 28E RB 8. Well Number 001 & 221H
1. Type of Well: Oil Well Gas Well Other		00, 0, 22
2. Name of Operator Matador Production Company		9. OGRID Number 228937
3. Address of Operator 5400 LBJ Freeway STE 1500		10. Pool name or Wildcat CULEBRA BLUFF;WOLFCAMP, SOUTH (GAS)
Dallas, TX 75240		COLEBRA BLOFF, WOLFCAMP, SOUTH (GAS)
4. Well Location Unit Letter D • 933 fee	t from the NORTH line and	859 feet from the WEST line
	et from the <u>NORTH</u> line and ownship 24S Range 28E	NMPM County EDDY
	wnship 24S Range 28E n (Show whether DR, RKB, RT, GR, etc	
3015		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	hange OTHER:	П
OTHER: 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.		
Please change the lease name for both of these wells from Ann Com 15 24S 28E RB to ANNE COM 15 24S 28E RB		
r lease change the lease name for both	To these wens non-yan com to 240 202 1	to to find 2 to 202 to
•		
		-
]	
Spud Date: 9/26/2016	Rig Release Date:	
,	<u> </u>	
		1 h - 1! - C
I hereby certify that the information above is true a	and complete to the best of my knowled	ge and belief.
SIGNATURE \	TITLE Regulatory Tech	DATE 10/10/2016
90.0		DVIONID 050 051 54/5
Type or print name Sherri Gore	E-mail address: sgore@matadorre	esources.com PHONE: 972-371-5467
For State Use Only	•	
	/) /	