Lichay Expended Dr., Hobbs, NA 88204 Desired Dr.	Two Copies	riate District	Office (ALCUE V			State of Ne					ı				_		rm C-105	
Date	<u>District I</u> Energy, Minerals and Natural Resources										Revised April 3, 2017								
District	District II FFR 1 2 2019																		
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© COMPLETION REPORT (Fill in boxes #1 through #31 for State and fee wells only) □ C.144 CLOSURE ATTACHNENT (Fill in boxes #1 through #6 #31 50 ms Rig Released and #32 and/or #32 and/or #32 ms the legal to the C-144 closure report in accordance with 19 15 17; 3.8 NMAC) 7. Type of Completion: □ NEW WELL □ WORKOVER □ DEEPENNG □ PLOGRACK □ DEFFERNT RESERVOR □ OTHER □ SUPPLIES OF SUPPLIES	VVELL	COMPL	ETIO	N OR F	RECC	MPL	ETION RE	POF	RT AN	۷D	LOG		A TOTAL CONTRACTOR OF THE PARTY						
C. CHAIL CLUSTER ATTACHMENT (Fill in boxes #1 through #31 files State, and Fee wells only) C. HAIL CLUSTER ATTACHMENT (Fill in boxes #1 through #31 files State, and Fee wells only) BYS, attach this and the plat to the C-144 closure report in accordance with 1915 17; 13 x MAZC BYS WEW WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SIMPLY WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SIMPLY WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SIMPLY WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DEPENING PUGGBACK DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DEPENING DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DEPENING DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DEPENING DIFFERENT RESERVOIR OTHER SAMPLY WELL WORKOVER DIFFERENT RESERVOIR OTHER SAMPLY WELL WELL	4. Reason for fill	ing:											5. Lease Name	e or U ER E	Init Agreei BREAKS	ment Nar S SWD	ne)		
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11. Post name or Wildest SWD, DEVONIAN SWD, SWD, SWD, SWD, SWD, SWD, SWD, SWD,	8. Name of Opera	ator											9 OGRID						
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13 Date Spudded	12.Location	Unit Ltr	Sect	ion	Towns	hip	Range	Lot			Feet from the	1e	N/S Line	Feet	from the	E/W Li	ine	County	
13. Date Spanded		Н	5		248	3	28E				2595		N	222	30 136	E		EDDY	
1/2/178											2515			2					
18. Total Measured Depth of Well 14.986 19. Plug Back Measured Depth 14.886										16.				uce)					
22. Producing Interval(s), of this completion - Top, Bottom, Name 13847 - 14886', OH DEVONIAN								oth	7	20.	Was Directi				21. Type S e	e Electric	and Ot	her Logs Run ed	
23.	22. Producing Int	terval(s), or	f this con	npletion - 1	Top, Bot	tom, Na	me						-						
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7 5/8 P110 29.7 & 33.7 13847 9 1/2 1035/H/1.23 10C 5950 by CBC 24. LINER RECORD 25. TUBING RECORD SIZE TOP BOTTOM SACKS CEMENT SCREEN SIZE DEPTH SET PACKER SET 5 1/2" 20# P110 13774 13774 BTC Winternally lined coating pressure of 1437 psi during fresh water flush. PRODUCTION Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Date of Test Hours Tested Choke Size Prod'n For Test Period Oil - Bbl Gas - MCF Water - Bbl. Gas - Oil Ratio Flow Tubing Pressure Calculated 24- Oil - Bbl. Gas - MCF Water - Bbl. Oil Gravity - API - (Corr.) N/A 31. List Attachments C-102, DS, Gyro, Logs 32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit. Latitude Longitude NAD83 I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief		140														_			
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I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief		1140	ut di	, rop				04					Longitude				NΔI	D83	
Signature Clus Mrmoe Printed Name Ava Monroe Title Sr. Regulatory Analyst Date 02/08/19	I hereby certif	fy that th	e inforn	nation sl	iown c		sides of this	form	ı is tru	e a	nd comple	ete .		f my	knowlea	ge and	belief		
The St. Regulatory Allaryst Date 02/00/19	Signature	1	4.		n #	F ۱۰		Moni	roe		Titl	و ح	Sr Regulato	nin A	nalvet		Date	02/08/1 <u>0</u>	
E-mail Address amonroe@matadorresources.com																			

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INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeaster	n New Mexico	Northwestern New Mexico					
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"				
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"				
B. Salt 2561/2561 (Lamar)	T. Atoka	T. Fruitland	T. Penn. "C"				
T. Yates_	T. Miss	T. Pictured Cliffs	T. Penn. "D"				
T. 7 Rivers	T. Devonian 13834/13840	T. Cliff House	T. Leadville				
T. Queen	T. Silurian_	T. Menefee	T. Madison				
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert				
T. San Andres	T. Simpson	T. Mancos	T. McCracken				
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte				
T. Paddock	T. Ellenburger	Base Greenhorn	T.Granite				
T. Blinebry	T. Gr. Wash	T. Dakota					
T.Tubb_	T. Delaware Sand 2598/2599	T. Morrison					
T. Drinkard	T. Bone Springs 6132/6133	T.Todilto					
T. Abo	Т	T. Entrada	• 4				
T. Wolfcamp 9359/9361	T.	T. Wingate					
T. Penn	Т	T. Chinle					
T. Cisco (Bough C)	T.	T. Permian	OIL OP CAS				

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	То	Thickness In Feet	Lithology	From	То	Thickness In Feet	Lithology
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