Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I – (575) 393-6161	Energy, Minerals and Natural Reso	ources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	ON CONCERNATION DIVIS		30-015-44608
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION DIVIS 1220 South St. Francis Dr.	ľ	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE X
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sainta 1 C, INIVI 67303		6. State Oil & Gas Lease No.
SUNDRY NOTI	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK CATION FOR PERMIT" (FORM C-101) FOR SUCH	TO A	JOE COLEMAN 13 23S 27E RB
1. Type of Well: Oil Well	Gas Well X Other		8. Well Number 201H
Name of Operator Matador Production Compan	у		9. OGRID Number 228937
Address of Operator 5400 LBJ Freeway, Ste. 1500	0, Dallas, TX 75240		10. Pool name or Wildcat PURPLE SAGE;WOLFCAMP(GAS)
4. Well Location			205
Unit Letter A :		ne and	feet from the E line
Section 14	Township 23S Range 2 11. Elevation (Show whether DR, RKB, R	7E	NMPM County EDDY
	3103' GR	I, GK, elc.	
40.01.1			
12. Check A	Appropriate Box to Indicate Nature of	f Notice,	Report or Other Data
NOTICE OF IN			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	· -	DIAL WOF	RK
PULL OR ALTER CASING	_	G/CEMEN	-
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM	D OTUE	D. I	
OTHER: 13. Describe proposed or comp		R: Install details, an	d give pertinent dates, including estimated date
of starting any proposed wo	ork). SEE RULE 19.15.7.14 NMAC. For N		
proposed completion or rec	ompletion.		
	2 7/8" L-80 tbg & 10 GLVs. XO @ 82	296'. Pad	ker @ 8761'. EOT @ 8752'.
Secure well & r	eturn to production.		
		* *	
			RECEIVED
	•		JAN 1 5 2020
	·		•
			EMNRD-OCD ARTĘSIA
Spud Date: 04/13/18	Rig Release Date:	05/40/	40
	Rig Release Date.	05/19/	18
•	Nig Release Date.	05/19/	18
I hereby certify that the information			· · · · · · · · · · · · · · · · · · ·
I hereby certify that the information	above is true and complete to the best of m		· · · · · · · · · · · · · · · · · · ·
		y knowledą	ge and belief.
SIGNATURE Qualy	above is true and complete to the best of m	y knowledg tory Ana	ge and belief. Solvey of the state of the s
	above is true and complete to the best of m	y knowledg tory Ana	ge and belief.
SIGNATURE Ava Monroe For State Use Only	above is true and complete to the best of m	y knowledg tory Ana	ge and belief. DATE 01/14/2020 DATE 1/14/2 2
SIGNATURE Ava Monroe Type or print name Ava Monroe	above is true and complete to the best of m	y knowledg tory Ana	ge and belief. DATE 01/14/2020 DATE 1/14/2 2
SIGNATURE Ava Monroe Type or print name Ava Monroe For State Use Only APPROVED BY:	above is true and complete to the best of m	y knowledg tory Ana	ge and belief. Ilyst DATE 01/14/2020 adorresources. PHONE: 972-371-5218