

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

Energy, Minerals and Natural Resources

Revised July 18, 2013

HOBBS OGD

FEB 06 2019

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

WELL API NO. 30-025-44509	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name AIRSTRIP 31 18 35 RN STATE COM	
8. Well Number #131H	
9. OGRID Number 228937	
10. Pool name or Wildcat AIRSTRIP;BONE SPRING	
4. Well Location Unit Letter M : 210 feet from the S line and 331 feet from the W line Section 31 Township 18S Range 35E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3948' GR	

**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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
Matador Production Company

3. Address of Operator  
5400 LBJ Freeway, Ste. 1500, Dallas, TX 75240

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

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

10/07/18 Open well to test casing for 30 min. Tested to 5351 psi; lost 221 psi. Good test.

10/12/18 - Perforate and fracture treat Bone Spring from 10615' - 15406' in 20 stages w/ 11,725,190 lbs sand.

10/19/18 WSI for ops on nearby well.

10/22 - 10/23 Mill plugs.

10/24/18 Open well to flowback.

10/25/18 Well begins to produce.

Spud Date:

08/18/18

Rig Release Date:

09/04/18

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 02/04/19

Type or print name Ava Monroe

E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218

For State Use Only

APPROVED BY:

Karen Sharp

TITLE Staff Mgr

DATE 2-7-19

Conditions of Approval (if any):