Submit 1 Copy To Appropriate District	State of New Mexico	Earm C 102
Office	Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-025-45622
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE
District IV - (505) 476-3460	Santa Fe, NM 3735 OCD	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	007 0.9	VB-2380
	S AND REPORTS ON WELLS 2019	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICAT	S TO DRILL OR TO DEEPEN OF PLUG BACK TO A	UNCLE DON STATE 35 22 35 STATE
PROPOSALS.)	s Well 🔲 Other	8. Well Number 001
2. Name of Operator Matador Production Company		9. OGRID Number 228937
3. Address of Operator		10. Pool name or Wildcat
5400 LBJ Freeway, Ste. 1500, I	Dallas, TX 75240	ROCK LAKE;WOLFCAMP (52767)
4. Well Location		
Unit Letter M :	361 feet from the <u>S</u> line and	654 feet from the W line
Section 35	Township 22S Range 35E	NMPM County LEA
]	1. Elevation (Show whether DR, RKB, RT, GR, etc.	c.)
3532' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	ENTION TO: SUP PLUG AND ABANDON C REMEDIAL WO	
		RK LI ALTERING CASING LI RILLING OPNS.
CLOSED-LOOP SYSTEM		
OTHER: OTHER: OTHER: Correcting Intermediate casing cementingreported.		
	ed operations. (Clearly state all pertinent details, a	•••
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
proposed completion or recompletion.		
Correcting Intermediate 1 casing cementing reported to 1415 ttl sacks w/ 1.35 yield.		
_		
Spud Date: 03/08/19	Rig Release Date:)3/29/19
Spud Date: 03/08/19	Rig Release Date:)3/29/19
Spud Date: 03/08/19	Rig Release Date:)3/29/19
- L	Rig Release Date:	
- L		
- L		lge and belief.
I hereby certify that the information about SIGNATURE	ove is true and complete to the best of my knowled TITLE_Sr. Regulatory Analy	ige and belief. <u>st DATE 10/22/19</u>
I hereby certify that the information about SIGNATURE	TITLE Sr. Regulatory Analy	tadorrosourcos PHONE: 972 371 5218
I hereby certify that the information about SIGNATURE	TITLE Sr. Regulatory Analy	tadorresources. PHONE: <u>972-371-5218</u>
I hereby certify that the information about SIGNATURE	TITLE <u>Sr. Regulatory Analy</u> E-mail address: <u>amonroe@ma</u>	ige and belief. <u>st DATE 10/22/19</u>
I hereby certify that the information about SIGNATURE	TITLE Sr. Regulatory Analy E-mail address: amonroe@ma	tadorresources. PHONE: <u>972-371-5218</u>
I hereby certify that the information about SIGNATURE	TITLE <u>Sr. Regulatory Analy</u> E-mail address: <u>amonroe@ma</u>	tadorresources. PHONE: <u>972-371-5218</u>