

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87414  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

**HOBBS OCD**

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

MAY 18 2015

RECEIVED

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-41678
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Matador Production Company		6. State Oil & Gas Lease No.
3. Address of Operator PO BOX 1936 ROSWELL NM 88202-1936 575/623-6601		7. Lease Name or Unit Agreement Name Airstrip 31 18 35 RN State Com
4. Well Location Unit Letter <u>M</u> : <u>150'</u> feet from the <u>SOUTH</u> line and <u>330</u> feet from the <u>West</u> line Section <u>31</u> Township <u>18S</u> Range <u>35E</u> NMPM County <u>Lea</u>		8. Well Number #201H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3953'		9. OGRID Number 228937
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Airstrip; Bone Springs
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☒  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: Change of formation

☒

OTHER:

☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Note: change of formation being Airstrip; Wolfcamp (970) See attached C-102.

OPER. OGRID NO. 228937  
PROPERTY NO. 314818  
FOOL CODE 970  
EFF. DATE 5/1/2015  
WELL NO. 30-025-41678

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE

*[Signature]*

TITLE PRODUCTION ANALYST

DATE 5/12/2015

Type or print name

For State Use Only

E-mail address: mlink@matadorresources.com

Telephone No. 575.623.6601

Petroleum Engineer

APPROVED BY:

*[Signature]*

TITLE

DATE

05/21/15

Conditions of Approval (if any):

MAY 21 2015