Submit 1 Copy To Appropriate Dis Office	0141	e of New Mexico	Form C-103
District 1 - (575) 393-6161		erals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88 District II – (575) 748-1283			30-025-44722
District III - (505) 334-6178OIL CONSERVATION DIVISION1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 Sonto Fe, NIM 87505		6. State Oil & Gas Lease No.	
District IV – (505) 476-3460 Sailla FC, 1919 57505 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oli & Gas Lease No. 313507	
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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 Oth	HOBBS OCD	8. Well Number 233H
2. Name of Operator Matador Production Company			9. OGRID Number 228937
3. Address of Operator	S400 LBJ Freeway	JUL 18 CON	10. Pool name or Wildcat
	STE 1500 Dallas. TX 75240		KEMNITZ;CISCO
4. Well Location		RECEIVED	
Unit Letter O	: 155 feet from	n the <u>South</u> line and	2399 feet from the East line
Section 22	Townsh	· · · · · · · · · · · · · · · · · · ·	NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4084'GR			
4004 GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE (PERFORM REMEDIAL WO	OF INTENTION TO: RK PLUG AND ABAN	_	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A			
PULL OR ALTER CASING		PL 🗌 CASING/CEME	
DOWNHOLE COMMINGLE	_		
CLOSED-LOOP SYSTEM OTHER:	BHL Change	I OTHER:	П
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.			
We would like to change our BHL to 100' North and 2314' East			
Submit additional well information as			
required by NMOCD Horizontal Rule			
specifications: NOTE: Intent			
		specificatio	
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Spud Date:		Rig Release Date:	
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I beacher contife that the information above is two and complete to the best of my knowledge and ballof			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
OF N	Ν.		also lie.
SIGNATURI	<i>₽</i>	TITLE Regulatory Tech	DATE_ <u>118/18</u>
Type or print name Sherri Go	y	E-mail address: sgore@matador	resources.com PHONE: 972-371-5467
For State Use Only			
APPROVED BX: Conditions of Approval (If an	Ngnarp	TITLE Maff 11/gr	date <i>/8</i> /8