Submit 1 Copy To Appropriate Distr Office	ct State of N	lew Mexico			Form C-103	
<u>District I</u> – (575) 393-6161	- (575) 393-6161 Energy, Minerals and Natural Resources			II ADINO	Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240			WE	WELL API NO. 30-025-45760		
811 S. First St., Artesia, NM 88210	, Artesia, NM 88210 SIL CONSERVATION DIVISION			5. Indicate Type of Lease		
Submit 1 Copy To Appropriate District Office 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 87 District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES OD REPORTS ON WELLS			: [STATE X FEE .		
District IV - (505) 476-3460 Santa Fe, NM 87505			6. 8	State Oil & Gas Lea	ase No.	
1220 S. St. Francis Dr., Santa Fe, 87505						
				Lease Name or Uni	t 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.)			<u> </u>	FLORENCE STATE COM 8. Well Number		
1. Type of Well: Oil Well				1340		
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, Dallas, TX 75240				ANTELOPE RIDGE;BONE SPRING, WEST		
4. Well Location						
Unit Letter O : 180 V feet from the S line and 1487 feet from the E line						
Section 23	Township 23			IPM Co	unty LEA	
	11. Elevation (Show whe		RT, GR, etc.)			
3382' GR						
12 Ch	ock Appropriate Box to Ind	licate Nature (of Notice Ren	ort or Other Date	a	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
				QUENT REPOR	RT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR						
TEMPORARILY ABANDON					ND A	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	☐ MULTIPLE COMPL☐	L CASII	NG/CEMENT JOE	, U		
CLOSED-LOOP SYSTEM	П					
OTHER:	Change of Location	OTHE				
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.						
PLEASE REVISE SHL AND BHL AS PER ATTACHED C-102. THE SHL FOR THIS WELL AND THE FLORENCE 23 23 34 AR 133H						
WERE REVERSED IN THE FIELD AND DUE TO INTERNAL MISCOMUNNICATION A SUNDRY WAS NOT FILED PRIOR						
TO COMPLETION.						
		[
Spud Date: 06/01/19	Rig Re	elease Date:	06/18/1	19		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
Thereby vertily that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE Was Morrison TITLE Sr. Regulatory Analyst DATE 10/30/19						
Type or print name Ava Mo	Tone of Ema	il addrass, amon	roe@matadorreso	UICES COM PLIONI	- 972-371-5218	
Type or print name Ava Monroe E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218 For State Use Only						
retroleum Engineer						
APPROVED BY:	TITLE	E		DATE_	11/10/19	
Conditions of Approval (if any	j:				•	