م-ع								
Submit 1 Copy To Appropriate District Office	Suce of New Mexice				Form C-103			
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources 625 N. French Dr., Hobbs, NM 88240				Revised July 18, 2013 WELL API NO. 30-015-23752				
District II         - (575) 748-1283         OIL CONSERVATION DIVISION           811 S. First St., Artesia, NM 88210         OIL CONSERVATION DIVISION				5. Indicate Type of Lease				
istrict III - (505) 334-6178         1220 South St. Francis Dr.           00 Rio Brazos Rd., Aztec, NM 87410         00 Control of the second sec				STA		FEE 🛛		
<u>District IV</u> – (505) 476-3460 2220 S. St. Francis Dr., Santa Fe, NM 37505	Santa Fe, NM 87505			6. State Oil & Gas Lease No.				
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.)					7. Lease Name or Unit Agreement Name			
					Tiger 14 24S <b>2</b> 8E RB			
1. Type of Well: Oil Well 🔲 Gas Well 🔀 Other				8. Well Number #1				
2. Name of Operator Matador Production Company					9. OGRID Number 228937			
3. Address of Operator 5400 LBJ Freeway Suite 1500					10. Pool name or Wildcat			
Dalla	Purple Sage; Wolfcamp (gas)							
4. Well Location	660 feet from the NOR	чтu	198	0 0		West		
			line and 198		et from the		line	
Section	14 Township 24S		28E	NMPM	Cou	nty EDDY		
	11. Elevation (Show whethe 2988 '	er DK, KKB,	к <i>і</i> , <i>б</i> к, <i>е</i> іс.)					
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or comp	CHANGE PLANS MULTIPLE COMPL	CON CAS OTH the all pertine NMAC. For with an NM his well	EDIAL WOR IMENCE DRI ING/CEMEN ER: MIT R IER: MIT R Multiple Con MOCD inspe	LLING OPNS FJOB esults fo d give pertine npletions: An ector pre-	ALTE PAN PAN r TA Sta nt dates, inc ttach wellbo sent on NM	ERING CAS ID A Itus Iuding estir ore diagram 12/4/18, I OIL CO ARTESIA DEC (	The second secon	
		-						
Spud Date: 1981	Rig Rele	ease Date:	1:					
		-						
hereby certify that the information	above is true and complete to	o the best of	my knowledg	e and helief.				
hereby certify that the information	,	5 110 0051 01						
	TITLE	Engineer			DATE_	12/5/18		
			rreal@matado			. (972)	371-5471	
Type or print name <u>Chris Vill</u> For State Use Only	arreal E-mail a	address:			PHUNE			
	2	~ A				,		
APPROVED BY:	TITLE	<u>) 1411 .</u>	Mgr_		DATE_	12-6-	-18	
Conditions of Approval (if any):				NTER				
				U	/			

Susana Martinez Governor

Ken McQueen Cabinet Secretary

Matthias Sayer Deputy Cabinet Secretary Heather Riley, Division Director Oll Conservation Division



Date:  $\frac{12/4}{18}$ 

API# 30 -015 - 23752

A Mechanical Integrity Test (M.I.T.) was performed on, Well Tiger 14 245 286 RB 001

\_\_\_\_\_M.I.T. is successful, the original chart has been retained by the Operator on site. Send a legible scan of the chart with an attached Original C-103 Form indicating reason for the test, via post mail to District NMOCD field office. A scanned image will appear online via NMOCD website, www.emnrd.state.nm.us/ocd/OCDOnline.htm 7 to 10 days after postdating.

\_\_\_\_\_M.I.T. is unsuccessful, the original chart is returned to the Operator. Repairs will be made, Operator is to schedule for a re-test within a 90-day period. If this is a test of a repaired well currently in non-compliance, all dates and requirements of the original are still in effect. No expectation of extension should be construed because of this test.

M.I.T. for Temporary Abandonment, shall include a detailed description on Form C-103, including the location of the CIBP and any other tubular goods in the well including the Operator's request for TA status timeline.

\_\_\_\_\_\_M.I.T. is successful, after the secondary request of a scheduled M.I.T. is performed. Therefore, Operator has within a 30-day period from the M.I.T. to submit a current C-103 along with a legible scan of the Chart, including a detailed description of the repair(s). Only after receipt of the C-103 will the noncompliance be closed.

\_\_\_\_\_M.I.T.**is successful**, initial of an injection well, you must submit a form C-103 to NMOCD within 30 days. A C-103 form must include a detailed description of the work performed on this well including the position of the packer, tubing information, the date of first injection, the tubing pressure and injection volume.

Please contact **Rusty Klein at 575-748-1283 x109** for verification to ensure documentation requirements are in place prior to injection process.

If I can be of additional assistance, please feel free to contact me at (575) 748-1283 ext. 114.

Thank You,

Gilbert Cordero, Staff Manager EMNRD-O.C.D. District II – Artesia, NM

> 1220 South St. Francis Drive • Santa Fe, New Mexico 87505 Phone (505) 476-3460 • Fax (605) 478-3462 • www.ernnrd.state.nm.ua/ood

