

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 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

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

Form C-103  
Revised July 18, 2013

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.)		WELL API NO. 30-015-44256
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		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 5400 LBJ FREEWAY, STE 1500, DALLAS, TX 75240		7. Lease Name or Unit Agreement Name GARRET STATE COM
4. Well Location Unit Letter D : 220 feet from the N line and 570 feet from the W line Section 32 Township 24S Range 29E NMPM County EDDY		8. Well Number 221H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2939' GR		9. OGRID Number 228937
		10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Perforate, fracture treat, produce <input checked="" type="checkbox"/>	

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.

11/28/17 Open well to test casing to 5780 psi for 30 min. Dropped 22 psi. Good test.  
Continue prep work for fracture treatment.

12/1 - 12/11/17 Perforate, fracture treat Wolfcamp formation 11051' - 15611' in 22 stages  
w/ 12,743,440 lbs sand.

12/14/17 Mill plugs. Shut well in for operations on nearby wells.

01/15/17 Open well to flowback, recovering load water.

01/21/17 Well begins to produce.

Spud Date:

09/06/17

Rig Release Date:

10/13/17

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Ava Monroe*

TITLE Sr. Engineering Tech

DATE 04/03/18

amonroe@matadorresources.com

Type or print name Ava Monroe

E-mail address:

PHONE: 972-271-5218

For State Use Only

APPROVED BY:

*Staff*

TITLE Staff

DATE 4-13-18

Conditions of Approval (if any):