

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

dist
up

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-015-20931

5. Indicate Type of Lease
STATE ☐ FEE ☒

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
Felmont-Atoka Com

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

RECEIVED
NOV - 5 1993

2. Name of Operator
Matador Operating Company

8. Well No.
1

3. Address of Operator
415 W. Wall, Ste 1101, Midland, TX 79701

9. Pool name or Wildcat
Atoka Penn

4. Well Location
Unit Letter D : 990 Feet From The North Line and 990 Feet From The West Line

Section 12 Township 18S Range 26E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3291' GL

11. 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

Propose to pull out of hole w/ pkr and tbq, set CIBP @ $\pm 8800'$ w/ 30' cement on top. TIH w/ tbq and packer, set pkr @ $\pm 8400'$, perforate additional Penn @ 8674-76, 8458-64, 4 JSPF, 0° phase. Stimulate w/ 15% HCL acid if warranted or necessary. Swab/flow to test. Place well on production.

See attached current well bore schematic. Current production uneconomic @ 15-20 MCF/D.

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

SIGNATURE [Signature] TITLE Operations Manager DATE 11-4-93

TYPE OR PRINT NAME R.F. BURKE TELEPHONE NO. 915-687-5950

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

NOV 26 1993

APPROVED BY SUPERVISOR, DISTRICT II TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: