

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.
30-015-24453

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.)

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

2. Name of Operator
Matador Operating Company

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

4. Well Location
Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line
Section 7 Township 19S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3274.1 GR

7. Lease Name or Unit Agreement Name
Walters

8. Well No.
1

9. Pool name or Wildcat
East Lake Morrow Gas

Four Mile Draw Atoka Gas

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: Set water tank ☒

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 set 210 bbl fiberglass salt water tank on well pad for produced water and tie down tank with guy lines.

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

SIGNATURE R. F. Burke TITLE Operations Manager DATE June 6, 1994
TYPE OR PRINT NAME R. F. Burke TELEPHONE NO. 915-687-5955

(This space for State Use)

APPROVED BY SUPERVISOR, DISTRICT II TITLE _____ DATE JUN 16 1994
CONDITIONS OF APPROVAL, IF ANY: