

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

Form C-103  
Revised July 18, 2013

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

WELL API NO. 30-015-46132
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name JACK SLEEPER STATE COM 9 16 23S 28E
8. Well Number 221H
9. OGRID Number 228937
10. Pool name or Wildcat PURPLE SAGE;WOLFCAMP (GAS)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3014' GR

**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 PRODUCTION COMPANY

3. Address of Operator  
5400 LBJ FREEWAY, STE 1500, DALLAS, TX 75240

4. Well Location  
Unit Letter M : 197 feet from the S line and 156 feet from the W line  
Section 4 Township 23S Range 28E NMPM County EDDY

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.

Which casing was tested? Open well????

11/16/19 Open well or 30 min. casing integrity test to 7206 psi; dropped 133 psi. Good test. WSI awaiting frac ops.  
12/03/19 OW to frac Wolfcamp formation 10620 - 20532' with 25,953,865 lbs sand in 55 stages.  
12/30/19 Fracture treatment complete. Well secured, awaiting drillout operations.  
01/03/20 Open well, bleed off to 0 psi. Begin milling plugs.  
01/05/20 Finish milling plugs. Well secured and SI awaiting flowback ops. SICP 2800 psi.  
01/19/20 Open well to flowback on 12/64" positive ck. SICP: 1300 psi. Well begins to produce.

\* Requesting tubing installation exception delay to allow for post-fracture pressure to decline, well to clean up and allow for safe installation.

TVD/MD: 10571/20675

Well reached TD 09/13/19

Spud Date:

07/03/19

Rig Release Date:

09/17/19

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

SIGNATURE



TITLE Sr Regulatory Analyst

DATE 03/17/2020

Type or print name Ava Monroe

E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218

For State Use Only

APPROVED BY:

DENIED

TITLE

DENIED

DATE 4/9/20

Conditions of Approval (if any):