

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

WELL API NO. 30-015-46176
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name DR LANA WHITE COM
8. Well Number 203H
9. OGRID Number 228937
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> 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 I : 1837 feet from the S line and 310 feet from the E line Section 13 Township 24S Range 28E NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2942' GR

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.

10/11/19 Open well to test csg for 30 min. @ 5630 psi; dropped 105 psi. Good test.
10/21 - 11/2/19 Perforate, fracture treat Wolfcamp 10215' - 14744' in 25 stages w/ 12,042,345 lbs sand.
11/2 - 11/4/19 Mill plugs; WSI for adjacent ops.
11/11/19 Open well to flowback.
11/12/19 Well begins to produce.

RECEIVED

JAN 10 2020

EMNRD-OCD ARTESIA

*All csg tests for a duration of 30 min. All tests good.

Spud Date:

07/28/19

Rig Release Date:

09/12/19

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

SIGNATURE

Ava Monroe

TITLE Sr. Regulatory Analyst

DATE 01/07/20

Type or print name Ava Monroe

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

For State Use Only

APPROVED BY:

[Signature]

TITLE

Staff mgr

DATE

1/15/20

Conditions of Approval (if any):