

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

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		WELL API NO. 30-015-46133 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No.
2. Name of Operator MATADOR PRODUCTION COMPANY		7. Lease Name or Unit Agreement Name JACK SLEEPER STATE COM 9 16 23S 28E 8. Well Number 215H
3. Address of Operator 5400 LBJ FREEWAY, STE 1500, DALLAS, TX 75240		9. OGRID Number 228937 10. Pool name or Wildcat PURPLE SAGE;WOLFCAMP (GAS)
4. Well Location Unit Letter <u>M</u> : <u>227</u> feet from the <u>S</u> line and <u>125</u> feet from the <u>W</u> line Section <u>4</u> Township <u>23S</u> Range <u>28E</u> NMPM County <u>EDDY</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3013' GR		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <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 for 30 min. casing integrity test to 6490 psi; dropped 98 psi. Good test. WSI awaiting frac ops.
 12/03/19 OW to frac Wolfcamp formation 9540' - 20172' with 27,032,140 lbs sand in 47 stages.
 12/31/19 Fracture treatment complete. Well secured and SI for operations on adjacent wells.
 01/10/20 Open well, bleed off to 0 psi. Begin milling plugs.
 01/12/20 Finish milling plugs. Well secured and SI awaiting flowback ops. SICP 2500 psi.
 01/19/20 Open well to flowback on 12/64" positive ck. SICP: 2500 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: 9540/20172

Well reached TD 08/15/19

Spud Date:

Rig Release Date:

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 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: TITLE DATE 4/9/20
 Conditions of Approval (if any):