

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

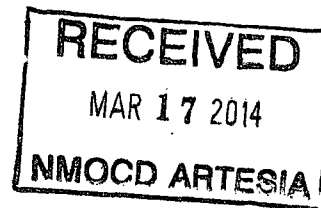
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-20931
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator MATADOR PRODUCTION COMPANY		6. State Oil & Gas Lease No. 302397
3. Address of Operator 5400 LBJ FREEWAY, STE 1500, DALLAS, TX 75240		7. Lease Name or Unit Agreement Name FELMONT-ATOKA COM
4. Well Location Unit Letter 0 : 990 feet from the NORTH line and 990 feet from the WEST line Section 12 Township 18S Range 26E NMPM County EDDY		8. Well Number 001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3291 GR		9. OGRID Number 228937
		10. Pool name or Wildcat ATOKA-PENN

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 checked="" 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: RESTORATION OF LOCATION <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.

02-19-2014: CUT OFF ANCHORS BELOW GROUND LEVEL & COVER. LEVEL & RESTORE LOCATION.



Spud Date:

09/13/1973

Rig Release Date:

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

SIGNATURE Michael G. Ernest TITLE ENGINEER DATE 03/13/14
Type or print name MICHAEL G. ERNEST E-mail address: mernest@matadorresources.com PHONE: 972-271-5223
For State Use Only

APPROVED BY: RLDado TITLE State Supervisor DATE 3/17/2014
Conditions of Approval (if any):

Submit Subsequent C-103 for location Release