

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. 30-015-43162
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 SCOTT WALKER STATE 36-22S-27E-RB
8. Well Number 204H
9. OGRID Number 228937
10. Pool name or Wildcat CASS DRAW; WOLFCAMP (GAS)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3076' 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 : 330 feet from the South line and 635 feet from the West line
 Section 36 Township 22S Range 27E 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: HYDRALIC FRACTURE - FLOWBACK <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.

09/02/2015 Test casing to 7,000 psi. Test good.
 09/02 - 09/05/2015 Perf & frac WC 9547 - 13615' OA in 14 stages with 8,123,800 lbs of sand.
 09/06 - 09/07 2015 Drill out frac plugs.
 09/08/2015 Begin flowback.
 TVD: 9380'
 MD: 14463'

Spud Date: 06/28/2015

Rig Release Date: 08/09/2015

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

SIGNATURE Ava Monroe TITLE Sr. Engineering Technician DATE 9/21/15

Type or print name Ava Monroe E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218

For State Use Only
 APPROVED BY: [Signature] TITLE Dist. Eng. Supervisor DATE 9/25/2015
 Conditions of Approval (if any):