

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
NM OIL CONSERVATION
ARTESIA DISTRICT
CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
RECEIVED
 JUN 18 2017

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. 30-015-44059
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		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.
3. Address of Operator 5400 LBJ FREEWAY, STE. 1500, DALLAS, TX 75240		7. Lease Name or Unit Agreement Name JOE COLEMAN 13 23S 27E RB
4. Well Location Unit Letter <u>P</u> : 2112 feet from the <u>N</u> line and 245 feet from the <u>E</u> line Section 14 Township 23S Range 27E NMPM County EDDY		8. Well Number 206H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3108' GR		9. OGRID Number 228937
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)		

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: CASING & CEMENT ACTUAL <input checked="" type="checkbox"/>	
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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.

STRING/RUN	HOLE SZ	CSG SZ/TYPE	CSG WT	SET DEPTH	SXS CMT	CLASS	TOP OF CMT	SXS TO SURF	METHOD	CSG TEST PSI	DUR/PASS
SURF - 03/17/17	17.500	13.375/J55	54.50	435	461	C	Q	116	CIRC	1000	30 MIN/GOOD
INT 1 - 03/20/17	12.250	9.625/J55	40.00	2412	818	C	0	204	CIRC	1350	30 MIN/GOOD
INT 2 TOP - 03/25/17	8.750	7.625/P110	29.70	2259	690	TXI	0	102	CIRC	1500	30 MIN/GOOD
INT 2 MID - 03/25/17	8.750	7.625/P110	29.70	8557		-	-	-	-	-	-
INT 2 BTM - 03/25/17	8.750	7.0/P110	29.00	9527		-	-	-	-	-	-
PROD TOP - 04/17/17	6.125	5.5/P110	20.00	8372	526	H	8400	-	CALC	-	-
PROD BTM - 04/17/17	6.125	4.5/P110	13.50	14282	-	-	-	-	-	-	-

*NOTE: INTERMEDIATE & PRODUCTION STRINGS TAPERED.

Spud Date:

03/17/17

Rig Release Date:

04/18/17

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 06/6/17

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 6-13-17

Conditions of Approval (if any):