

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

Record Clean Up

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. 30-015-43993
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input 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 GUITAR 10 24S 28E RB
4. Well Location Unit Letter <u>D</u> : <u>963</u> feet from the <u>N</u> line and <u>255</u> feet from the <u>W</u> line Section <u>11</u> Township <u>24S</u> Range <u>28E</u> NMPM County <u>EDDY</u>		8. Well Number <u>205H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2980' 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 checked="" type="checkbox"/> OTHER: <input 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	TOC	SXS TO SURF	METHOD	CSG TEST PSI	DUR/PASS
SURF - 01/18/17	17.500	13.375/J55	54.50	589	586	C	0	176	CIRC	1000	30 MIN/GOOD
INT 1 - 01/21/17	12.250	9.625/J55	40.00	2704	856	C	0	263	CIRC	1350	30 MIN/GOOD
INT 2 TOP - 01/26/17	8.750	7.625/P110	29.70	2595	703	TXI	1600	0.0	CALC	1500	30 MIN/GOOD
INT 2 MID - 01/26/17	8.750	7.625/P110	29.70	9062	-	-	-	-	-	-	-
INT 2 BTM - 01/26/17	8.750	7.0/P110	29.00	10087	-	-	-	-	-	1500	30 MIN/GOOD
PROD TOP - 03/10/17	6.125	5.5/P110	20.00	8981	531	H	9000	-	CALC	5800	30 MIN/GOOD
PROD BTM - 03/10/17	6.125	4.5/P110	13.50	14571	-	-	-	-	-	-	30 MIN/GOOD

NEW OIL CONSERVATION

ARTESIA DISTRICT

JUL 17 2017

RECEIVED

*NOTE: INTERMEDIATE & PRODUCTION STRINGS TAPERED.

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. Engineering Tech DATE 06/05/17
amonroe@matadorresources.com
 Type or print name Ava Monroe E-mail address: amonroe@matadorresources.com PHONE: 972-271-5218
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____