

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. 30-025-26192
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-2949
7. Lease Name or Unit Agreement Name PIPELINE 16 STATE
8. Well Number 001
9. OGRID Number 228937
10. Pool name or Wildcat Quail Ridge; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 G : 1980 feet from the NORTH line and 1980 feet from the EAST line
 Section 16 Township 19S Range 34E NMPM County LEA

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: WORKOVER <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.

10/16/14 SET CIBP @ 10,040' & TEST - GOOD. DUMP 35' CEMENT ON TOP OF PLUG.
 10/17/14 PERF BS: 9574-9592' 6 HOLES/FT - 108 HOLES TTL
 9523-9543' 6 HOLES/FT - 120 HOLES TTL
 9495-9510' 6 HOLES/FT - 90 HOLES TTL
 10/19-10/20/14 INSTALL 2 7/8" TBG; EOT 9703'
 10/20-10/22/14 SWABBING
 10/25/2014 PUT WELL BACK TO PRODUCTION.

Spud Date: ORIG: 01/27/1979
 THIS WORKOVER: 10/16/2014

Rig Release Date: THIS WORKOVER: 10/24/2014

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

SIGNATURE Casey M. McCain TITLE Engineer DATE 10-31-14
 Type or print name Casey M. McCain E-mail address: cmccain@matadorresources.com PHONE: 432-664-6140
For State Use Only
 APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 11/04/14
 Conditions of Approval (if any):

NOV 05 2014