

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

HOBBS OCD

WELL API NO. 30-025-43816
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 AIRSTRIP 31 18 35 RN STATE COM
8. Well Number 132H
9. OGRID Number 228937
10. Pool name or Wildcat AIRSTRIP;BONE SPRING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3937' 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 N : 850 feet from the S line and 1638 feet from the W line
 Section 31 Township 18S Range 35E NMPM County LEA

SEP 11 2017
RECEIVED

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: PERF/FRAC/PROD <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.
 Proposing to delay tubing installation in order for well to clean up after fracture treatment and to determine by observing well as to what type of artificial lift (if necessary) will be required.

08/09/17-08/17/17 Open well, test csg to 5060 psi for 30 min. Test good.
 Perforate and fracture treat Bone Spring 10888-15248 with 12,370,320 lbs sand in 18 stages.
 08/19/17-08/20/17 Mill plugs.
 08/21/17 Begin load recover; well flowing back.
 08/23/17 Well begins to produce.

Spud Date: 06/10/17 Rig Release Date: 07/2/2017

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 09/05/17
 Type or print name Ava Monroe E-mail address: amonroe@matadorresources.com PHONE: 972-371-5218

For State Use Only
 APPROVED BY: *[Signature]* TITLE Petroleum Engineer DATE 10/05/17
 Conditions of Approval (if any):