

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
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

HOBBS OCD
MAY 16 2018
RECEIVED

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| 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. 30-025-43532 |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other | | 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 LEO THORSNESS 13 24 33 |
| 4. Well Location Unit Letter <u>D</u> ; <u>539</u> feet from the <u>B</u> line and <u>25</u> feet from the <u>W</u> line Section <u>13</u> Township <u>24S</u> Range <u>33E</u> NMPM County <u>LEA</u> | | 8. Well Number <u>211H</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3601' GR | | 9. OGRID Number 228937 |
| | | 10. Pool name or Wildcat WC-025 G-09 S243310P:UPPER WOLFCAMP |

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: Perforate, fracture treat, produce <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.

- 02/10/18 -
- 02/18/18 Open well to test casing for 30 min. Held 5760 psi; pressure drop was 60 psi. Good test.
Perforated the Wolfcamp formation 12,616' - 16,887' and fracture treated w/ 12,734,849 lbs sand in 21 stages.
- 02/21/18 -
- 02/22/18 Mill plugs.
- 02/23/18 Begin load water recovery.
- 02/24/18 Well begins to produce.

Spud Date: 12/10/17 Rig Release Date: 01/04/18

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 04/24/18

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

For State Use Only

APPROVED BY: *Karen Sharp* TITLE Staff Mgr DATE 5-16-18
 Conditions of Approval (if any):