

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. 30-025-44649
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 FLORENCE STATE 23 23 34 AR
8. Well Number 133H
9. OGRID Number 228937
10. Pool name or Wildcat Antelope Ridge; Bone Spring, West (2209)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3382' 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 O : 210 feet from the S line and 1487 feet from the E line
Section 23 Township 23S Range 34E NMPM County LEA

HOBBS, NM
MAR 20 2019
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 checked="" type="checkbox"/>		OTHER: <input 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.

Please change proposed depth of well to 16150' MD.

Please change casing & cement program as per the attached.

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. Regulatory Analyst DATE 03/20/19

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 03/22/19

Conditions of Approval (if any):

Well Name: Florence State 23-23S-34E AR #133H

30-025-44649

STRING	FLUID TYPE	HOLE SZ	CSG SZ	CSG GRADE	CSG WT	DEPTH SET	TOP CSG	TTL SX CEMENT	EST TOC
SURF	FRESH WTR	17.5	13.375	J-55	54.50	1000	0	900	0
INT 1	BRINE	12.25	9.625	J-55	40.00	5200	0	1800	0
PROD	CUT BRINE	8.75	5.5	P-110	20.00	16150	0	2700	3700

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