

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505	<b>Form C-105</b> Revised April 3, 2017									
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>		1. WELL API NO. <b>30-025-45622</b> Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No. <b>VB-2380</b>									
4. Reason for filing: <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)		5. Lease Name or Unit Agreement Name <b>UNCLE DON 35 22 35 STATE</b>  6. Well Number:  <b>001</b>									
7. Type of Completion: <input checked="" type="checkbox"/> <b>NEW WELL</b> <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER											
8. Name of Operator <b>MATADOR PRODUCTION COMPANY</b>		9. OGRID <b>228937</b>									
10. Address of Operator  <b>5400 LBJ FREEWAY, STE. 1500, DALLAS, TX 75240</b>		11. Pool name or Wildcat  <b>ROCK LAKE;WOLFCAMP (52767)</b>									
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	
Surface:	M	35	22S	35E		361	S	654	W	LEA	
BH:	(VERT)										
13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released		16. Date Completed (Ready to Produce)		17. Elevations (DF and RKB, RT, GR, etc.)					
03/08/19	03/24/19	03/29/19		05/15/19		3532' GR					
18. Total Measured Depth of Well		19. Plug Back Measured Depth		20. Was Directional Survey Made?		21. Type Electric and Other Logs Run					
12,100' MD		12092' MD		Y		Gamma					
22. Producing Interval(s), of this completion - Top, Bottom, Name							*Cement in hole 12100' - 12092' MD				
11,222' - 11,810':Wolfcamp											
<b>23. CASING RECORD (Report all strings set in well)</b>											
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
13.375		J55/54.5#		1841		17.5		1447 1.33 C		0	
9.625		J55/40.0#		6114		12.25		1415 1.35 C		0	
7.625		P110/29.7#		5643		8.75		643 1.46 C		0	
7.625		P110/29.7#		12092		8.75		---		0	
<b>24. LINER RECORD</b>											
SIZE	TOP	BOTTOM	SACKS CEMENT	25. TUBING RECORD							
				SIZE	DEPTH SET	PACKER SET					
				2 7/8	10188'	---					
26. Perforation record (interval, size, and number)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.							
11,222' - 11810'; 27 clusters tfl, 108 shots tfl @ 0.44"				DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED					
				11,222 - 11,810'		Acidized in 5 stages; 15% HCL 24,936 gal total; flushed w/					
						364 bbls tfl fresh wtr treated w/2% KCL & biocide.					
<b>28. PRODUCTION</b>											
Date First Production		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> )				Well Status ( <i>Prod. or Shut-in</i> )					
05/15/19		Pump (Shores 75 HP rod pump)				Prod.					
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio				
06/07/19	24	Open		27	0	125	0				
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - ( <i>Corr.</i> )					
13	16		27	0	125	41.9					
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> )						30. Test Witnessed By					
Flared						Mike Bustamante					
31. List Attachments											
DS, C-102, Log											
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.						33. Rig Release Date:					
34. If an on-site burial was used at the well, report the exact location of the on-site burial:											
Latitude			Longitude			NAD83					
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief											
Signature	Printed Name			Title			Date				
	Ava Monroe			Sr. Regulatory Analyst			10/22/19				
E-mail Address amonroe@matadorresources.com											

