

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised May 08, 2003

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

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. 30-025-36255
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Matador Operating Company		6. State Oil & Gas Lease No.
3. Address of Operator 8340 Meadow Road #150, Dallas, TX 75231		7. Lease Name or Unit Agreement Name Laguna Deep Unit
4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>North</u> line and <u>950</u> feet from the <u>West</u> line Section <u>36</u> Township <u>19S</u> Range <u>33E</u> NMPM County <u>Lea</u>		8. Well Number 007
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3590 GR		9. OGRID Number 14245
		10. Pool name or Wildcat Gem; Morrow, East (Gas)

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 COMPLETION <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"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

7-29-03 RAN 317 JOINTS OF 5 1/2" 20.0 # P-110 LT&C CSG. TOTAL PIPE = 13,639.92' SET AT 13,617'. SHOE JOINT = 45.06'. TOP OF COLLAR AT 13,571.94'. TOP OF DV TOOL = 8,787' RIG DN CSG CREW; CIRC CSG; CMT 1ST STAGE WITH 275 SX OF INTERFILL "H" (11.9 PPG, 2.45 FT3/SACK, 14.12 GPS) & 500 SACKS OF SUPER "H" MODIFIED W/ 0.4% CFR-3, 0.5% HALAD-344, 0.3% HR7, 1 PPS SALT (13.0 PPG, 1.66 FT3/SACK, 8.69 GPS) / FULL RETURNS THROUGHOUT, BUMPED PLUG W/ 2010 PSI - 500 PSI OVER FCP, FLOATS HELD. CMT SECOND STAGE WITH 750 SX OF INTERFILL "H" (11.9 PP, 2.45 FT3/SX, 14.12 GPS) AND 100 SX OF PREMIUM "H" - NEAT (15.6 PPG, 1.17 FT3/SX, 5.22 GPS). FULL RETURNS THROUGHOUT - BUMPED PLUG AND CLOSED DV TOOL W/ 3,130 PSI OVER 1,770 PSI FCP - HELD RELEASE RIG @ 15:00 ON 07/30/2003

**As information - Tom Brown, Inc. (023230) took over operations 7/1/03. Currently WO Op Change from OCD **

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

SIGNATURE Kelli Werner TITLE Regulatory Reporting Supervisor DATE 9/6/03

Type or print name Kelli Werner Telephone No. (432) 688-9446

(This space for State use)

APPROVED BY Henry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE SEP 11 2003
Conditions of approval, if any: