

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. <b>32-005-21130</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>Z3756</b>
7. Lease Name or Unit Agreement Name <b>State LLA</b>
8. Well No. <b>2</b>
9. Pool name or Wildcat <b>Little Lucky Lake Morrow</b>


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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator <b>Matador Operating Company</b>	
3. Address of Operator <b>415 W. Wall, Ste 1101, Midland, TX 79701</b>	
4. Well Location Unit Letter <b>B</b> : <b>660</b> Feet From The <b>North</b> Line and <b>1980</b> Feet From The <b>East</b> Line Section <b>32</b> Township <b>15S</b> Range <b>30E</b> NMPM <b>Chaves</b> County	
10. Elevation (Show whether DF, RKB, RT, Gh, etc.) <b>10,600 3949 GL</b>	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

Notice to confirm that intent is to drill gas well on 320 acres. C-102 showing 320 acres is being filed.

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

SIGNATURE  TITLE Operations Manager DATE Dec. 14, 1994  
TYPE OR PRINT NAME R. F. Burke TELEPHONE NO. 915-687-5955

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DEC 16 1994

APPROVED BY  TITLE Director, OCM DATE

CONDITIONS OF APPROVAL, IF ANY:

18

**RECEIVED**

DEC 15 1994  
OCD HOBBS  
OFFICE

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State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised February 10, 1994  
Instruction on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
	80285	Little Lucky Lake Morrow
Property Code	Property Name	Well Number
15059	STATE LLA	2
OGRID No.	Operator Name	Elevation
014245	MATADOR OPERATING COMPANY	3949'

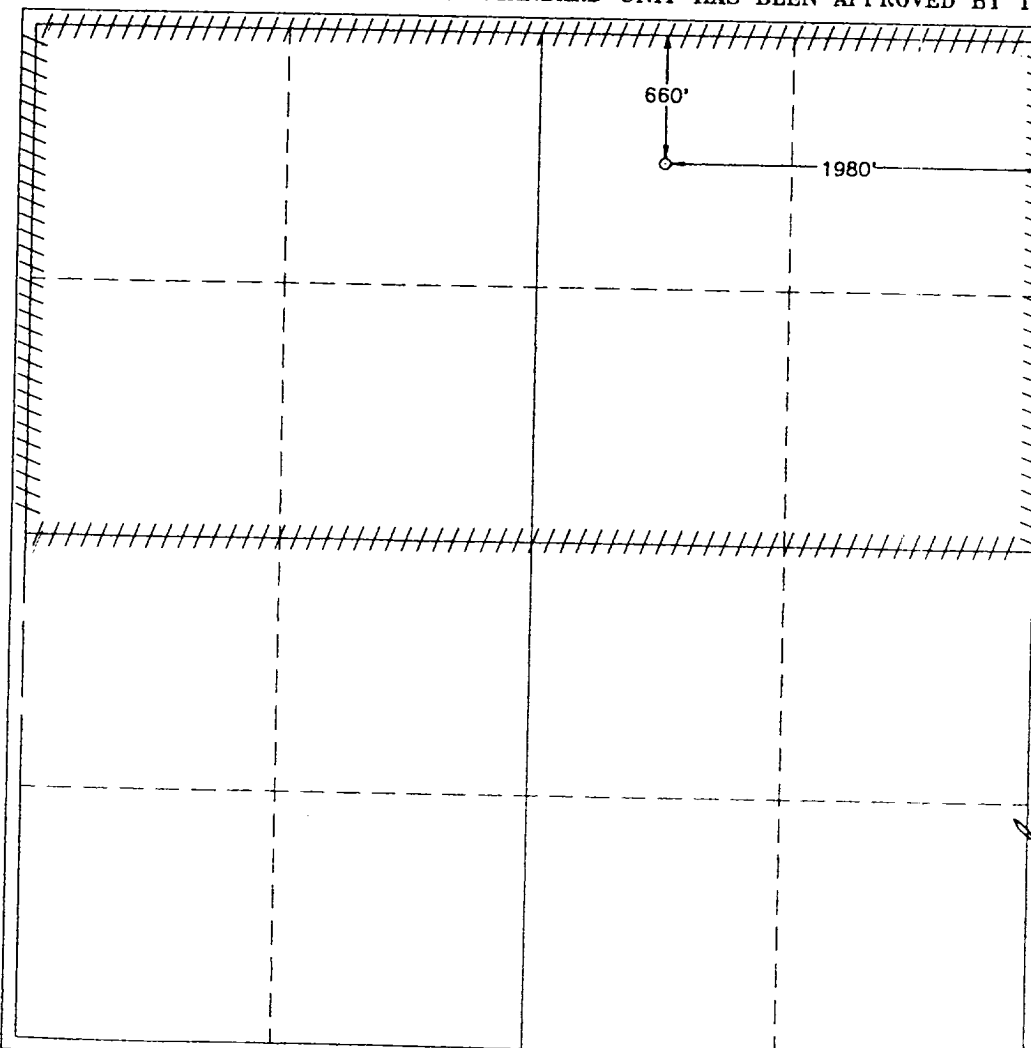
Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	32	15 S	30 E		660	NORTH	1980	EAST	CHAVES

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres	Joint or Infill	Consolidation Code	Order No.						
320									

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION

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



Signature

R. F. Burke

Printed Name

Operations Manager

Title

December 14, 1994

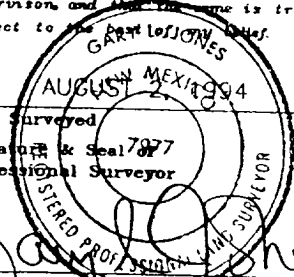
Date

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal  
Professional Surveyor



W.O. Num. 94-1-1359

Certificate No. JOHN W. WEST, 676  
RONALD J. EDSON, 3239  
GARY L. JONES, 7977

RECEIVED

SEP 15 1964

U.S. HOUSE OF  
REPRESENTATIVES  
OFFICE