Submit 3 Copies To Appropriate District Office	State of New Mexico			·	Form C-103 Revised March 25, 199
District I 1625 N. French Dr., Hobbs, NM 87240 District II	N. French Dr., Hobbs, NM 87240			WELL API NO. 30-025-35348	
11 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION			5. Indicate Type	of Lease	
District III 2040 South Pacheco			neco	STATE I	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			6. State Oil & C		
2040 South Pacheco, Santa Fe, NM 87505				o. State On & C	ias Lease IVO.
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICAT PROPOSALS.)		PEN OR PL	UG BACK TO A	Lease Name or U  Laughlin	nit Agreement Name:
1. Type of Well:  Oil Well ☑ Gas Well ☐	Other				
2. Name of Operator				Well No.	
Matador Operating Company				3	
3. Address of Operator				9. Pool name or Wildcat	
8340 Meadow Rd., #158, Dallas, TX 75231				Wildcat (Drinkard)	
4. Well Location					
Unit LetterO:	430 feet from the	_south	line and165	feet from	theeastline
Section 4			Range 37E	NMPM Lea	County
	0. Elevation (Show v	vhether Di	R, RKB, RT, GR, etc	:.)	
	oropriate Box to In	dicate N	ature of Notice	Report or Other	Data
NOTICE OF INTE	<del>-</del>	uicaic iv	i e	SEQUENT RE	
PERFORM REMEDIAL WORK [] F			REMEDIAL WOR		ALTERING CASING [
TEMPORARILY ABANDON 🔲 (	CHANGE PLANS		COMMENCE DRILLING OPNS.		PLUG AND ABANDONMENT
	MULTIPLE COMPLETION		CASING TEST AI CEMENT JOB	ND 区	, 15, 11, 15 6 1 1 1 1 1
OTHER:			OTHER:		[
12. Describe proposed or completed of starting any proposed work). Sor recompilation.	operations. (Clearly s SEE RULE 1103. For	tate all per Multiple (	tinent details, and g Completions: Attac	give pertinent dates, h wellbore diagram	including estimated date of proposed completion
Spudded 12-1/4" hole 2/3/01. Drilled w/ 450 sxs Halliburton Lite + ppg, yld 1.32). Bump plug w WOC. Cut off conductor & 5 pipe ram to 1000 psi OK. Re	6 PPS salt + .25 PPS 5/ 500 psi over check f 3-5/8" csg. NU 10" 31	Flocele (1 loat OK. ( M psi BOF	2.5 ppg, yld 1.99). Circ 225 sx to pit. J	Tail w/ 200 sx Class ob complete 2:25 P	ss C w/ 2% CaCl2 (14.8 M MST 2/5/01
I hereby certify that the information al SIGNATURE	pove is true and compl	ete to the	best of my knowled Production Assi		DATE <b>2</b> -/5 -0/
Type or print name Patti Lankfo	rd			Telephone No	. 214-987-7130
(This space for State use)			i de la servició de la companya de La companya de la co		
APPPROVED BY		_TITLE		<b>F</b>	DATE
Conditions of approval, if any:					