	State of New Mexico			Form C-103			
Office District 1 1625 N. Franch Dr. Habba NM 87240	Energy, Minerals and Natural Resources		ces	Revised March 25, 1999 WELL API NO.			
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION			30-025-36000			
1301 W. Grand Avenue, Artesia, NM				5. Indicate Type of Lease			
88210 District III	2040 South Pacheco Santa Fe, NM 87505			STATE	E 🗆 FEE	İ X İ	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV		e, NIVI 8/3U3	(5. State Oil	& Gas Lease No	•	
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	TICES AND REPORTS COSALS TO DRILL OR TO DE	EPEN OR PLUG BACK TO		7. Lease Nam	ne or Unit Agreen	ment Name	
 Type of Well: Oil Well	☐ Other			L	aughlin "5"		
2. Name of Operator				8. Well No.			
Matador Operating Company				3			
3. Address of Operator	my 25221			9. Pool name			
8340 Meadow Road #150, Dallas	, TX 75231			Monument;	TUDD		
4. Well Location							
Unit Letter I	: 2100 feet fro	om the <u>South</u>	_ line and	fee	t from the _East_	line	
Section 5	Township	20S Range	37E	NM	PM lea	County	
	•	whether DR, RKB, RT,	GR, etc.)				
11 011-		R: 3560'	otica P	enort or Otl	her Data		
	Appropriate Box to In	adicate Nature of N				: .	
NOTICE OF II PERFORM REMEDIAL WORK [NTENTION TO: PLUG AND ABANDO	N 🗆 REMEDIA		_	REPORT OF	CASING	
TEMPORARILY ABANDON [CHANGE PLANS	COMMEN	ICE DRILI	LING OPNS. [PLUG ANI		
PULL OR ALTER CASING [MULTIPLE COMPLETION	CASING T] (***************************************	11112111	
OTHER:		☐ OTHER:					
12. Describe proposed or compl of starting any proposed wor or recompilation.	eted operations. (Clearly k). SEE RULE 1103. Fo	state all pertinent detai: r Multiple Completions	ls, and gives: Attach	e pertinent da wellbore diag	ates, including es ram of proposed	stimated dat completion	
Spudded well on 10/01/02. Drille C Light + 6# salt + 1/4# Flocele (1 sx to pit. Test blind rams to 1000	2.5 ppg, 2.07 yield). Tail	Ran 29 jts of 8-5/8" 24# . w/200 sx Class C + 2%	# J-55 ST6 %CaCl2.	&C casing to Displace w/7	1216'. Cement v 3 bbls water. Ci	w/360 Class rculate 117	
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					4		
There has contifue that the information	ion shove is true and com	nlete to the hest of my l	knowledg	e and belief			
I hereby certify that the information	Pink			e and belief.		10/10/03	
I hereby certify that the information of the supplemental	ion above is true and com	plete to the best of my l Regulatory Analys	<u>st</u>			10/10/02	
SIGNATURE Sharon Type or print name Sharon	CAP TITLE_	Regulatory Analys	stT	elephone No.	DATE 214-987-7174	10/10/02	
SIGNATURE Shaw	CAP TITLE_		st T L SIGNEI	elephone No.		10/10/02 L_2 8 2 0	