

| <b>District I</b><br>1625 N. French Dr., Hobbs, NM 88240<br>Phone:(575) 393-6161 Fax:(575) 393-0720<br><b>District II</b><br>811 S. First St., Artesia, NM 88210<br>Phone:(575) 748-1283 Fax:(575) 748-9720<br><b>District III</b><br>1000 Rio Brazos Rd., Aztec, NM 87410<br>Phone:(505) 334-6178 Fax:(505) 334-6170<br><b>District IV</b><br>1220 S. St Francis Dr., Santa Fe, NM 87505<br>Phone:(505) 476-3470 Fax:(505) 476-3462                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>State of New Mexico</b><br><b>Energy, Minerals and Natural Resources</b><br><b>Oil Conservation Division</b><br><b>1220 S. St Francis Dr.</b><br><b>Santa Fe, NM 87505</b> | Form C-103<br>August 1, 2011<br>Permit 312642<br>WELL API NUMBER<br>30-025-47426<br>5. Indicate Type of Lease<br>S<br>6. State Oil & Gas Lease No.<br><br>7. Lease Name or Unit Agreement Name<br>APOLLO STATE COM |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
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| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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:<br>O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                               | 8. Well Number<br>182H                                                                                                                                                                                             |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 2. Name of Operator<br>TAP ROCK OPERATING, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                               | 9. OGRID Number<br>372043                                                                                                                                                                                          |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 3. Address of Operator<br>523 Park Point Drive, Suite 200, Golden, CO 80401                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                               | 10. Pool name or Wildcat                                                                                                                                                                                           |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 4. Well Location<br>Unit Letter <u>N</u> : <u>855</u> feet from the <u>S</u> line and feet <u>2265</u> from the <u>W</u> line<br>Section <u>21</u> Township <u>24S</u> Range <u>33E</u> NMPM _____ County <u>Lea</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                               |                                                                                                                                                                                                                    |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3537 GR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                               |                                                                                                                                                                                                                    |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/><br>Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                               |                                                                                                                                                                                                                    |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data<br><table style="width:100%;"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE OF PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: <b>Drilling/Cement</b> <input checked="" type="checkbox"/></td> </tr> </table>                                                                                                                                                       |                                                                                                                                                                               |                                                                                                                                                                                                                    | NOTICE OF INTENTION TO:                   |                              | SUBSEQUENT REPORT OF:      |                           | PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> | TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE OF PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> |           | Other: _____ |      | Other: <b>Drilling/Cement</b> <input checked="" type="checkbox"/> |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| NOTICE OF INTENTION TO:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                               | SUBSEQUENT REPORT OF:                                                                                                                                                                                              |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | PLUG AND ABANDON <input type="checkbox"/>                                                                                                                                     | REMEDIAL WORK <input type="checkbox"/>                                                                                                                                                                             | ALTER CASING <input type="checkbox"/>     |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| TEMPORARILY ABANDON <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CHANGE OF PLANS <input type="checkbox"/>                                                                                                                                      | COMMENCE DRILLING OPNS. <input type="checkbox"/>                                                                                                                                                                   | PLUG AND ABANDON <input type="checkbox"/> |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| PULL OR ALTER CASING <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MULTIPLE COMPL <input type="checkbox"/>                                                                                                                                       | CASING/CEMENT JOB <input type="checkbox"/>                                                                                                                                                                         |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| Other: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                               | Other: <b>Drilling/Cement</b> <input checked="" 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:<br>Attach wellbore diagram of proposed completion or recompletion.<br>See attached description of work.<br>See Attached<br><b>1/22/2022</b> Spudded well.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                               |                                                                                                                                                                                                                    |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| <b>Casing and Cement Program</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>String</th> <th>Fluid Type</th> <th>Hole Size</th> <th>Csg Size</th> <th>Weight lb/ft</th> <th>Grade</th> <th>Est TOC</th> <th>Dpth Set</th> <th>Sacks</th> <th>Yield</th> <th>Class</th> <th>1" Dpth</th> <th>Pres Held</th> <th>Pres Drop</th> <th>Open Hole</th> </tr> </thead> <tbody> <tr> <td>01/23/22</td> <td>Surf</td> <td>FreshWater</td> <td>17.5</td> <td>13.375</td> <td>54.5</td> <td>J55</td> <td>0</td> <td>1240</td> <td>938</td> <td>1.34</td> <td>C</td> <td></td> <td>1500</td> <td>0</td> <td>N</td> </tr> <tr> <td>01/30/22</td> <td>Int1</td> <td>Brine</td> <td>12.25</td> <td>9.625</td> <td>40</td> <td>J55</td> <td>0</td> <td>5250</td> <td>1053</td> <td>1.33</td> <td>C</td> <td></td> <td>1500</td> <td>0</td> <td>N</td> </tr> <tr> <td>03/11/22</td> <td>Prod</td> <td>OilBasedMud</td> <td>8.75</td> <td>5.5</td> <td>20</td> <td>P110</td> <td>1800</td> <td>20169</td> <td>1127</td> <td>1.63</td> <td>C</td> <td></td> <td></td> <td></td> <td>N</td> </tr> </tbody> </table> |                                                                                                                                                                               |                                                                                                                                                                                                                    | Date                                      | String                       | Fluid Type                 | Hole Size                 | Csg Size                                       | Weight lb/ft                              | Grade                                  | Est TOC                               | Dpth Set                                     | Sacks                                    | Yield                                            | Class                                     | 1" Dpth                                       | Pres Held                               | Pres Drop                                  | Open Hole | 01/23/22     | Surf | FreshWater                                                        | 17.5 | 13.375 | 54.5 | J55 | 0 | 1240 | 938 | 1.34 | C |  | 1500 | 0 | N | 01/30/22 | Int1 | Brine | 12.25 | 9.625 | 40 | J55 | 0 | 5250 | 1053 | 1.33 | C |  | 1500 | 0 | N | 03/11/22 | Prod | OilBasedMud | 8.75 | 5.5 | 20 | P110 | 1800 | 20169 | 1127 | 1.63 | C |  |  |  | N |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | String                                                                                                                                                                        | Fluid Type                                                                                                                                                                                                         | Hole Size                                 | Csg Size                     | Weight lb/ft               | Grade                     | Est TOC                                        | Dpth Set                                  | Sacks                                  | Yield                                 | Class                                        | 1" Dpth                                  | Pres Held                                        | Pres Drop                                 | Open Hole                                     |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 01/23/22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Surf                                                                                                                                                                          | FreshWater                                                                                                                                                                                                         | 17.5                                      | 13.375                       | 54.5                       | J55                       | 0                                              | 1240                                      | 938                                    | 1.34                                  | C                                            |                                          | 1500                                             | 0                                         | N                                             |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 01/30/22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Int1                                                                                                                                                                          | Brine                                                                                                                                                                                                              | 12.25                                     | 9.625                        | 40                         | J55                       | 0                                              | 5250                                      | 1053                                   | 1.33                                  | C                                            |                                          | 1500                                             | 0                                         | N                                             |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| 03/11/22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Prod                                                                                                                                                                          | OilBasedMud                                                                                                                                                                                                        | 8.75                                      | 5.5                          | 20                         | P110                      | 1800                                           | 20169                                     | 1127                                   | 1.63                                  | C                                            |                                          |                                                  |                                           | N                                             |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                               |                                                                                                                                                                                                                    |                                           |                              |                            |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| <table style="width:100%;"> <tr> <td>SIGNATURE</td> <td><u>Electronically Signed</u></td> <td>TITLE</td> <td><u>Regulatory Manager</u></td> <td>DATE</td> <td><u>3/22/2022</u></td> </tr> <tr> <td>Type or print name</td> <td><u>Christian Combs</u></td> <td>E-mail address</td> <td><u>ccombs@taprk.com</u></td> <td>Telephone No.</td> <td><u>720-360-4028</u></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                               |                                                                                                                                                                                                                    | SIGNATURE                                 | <u>Electronically Signed</u> | TITLE                      | <u>Regulatory Manager</u> | DATE                                           | <u>3/22/2022</u>                          | Type or print name                     | <u>Christian Combs</u>                | E-mail address                               | <u>ccombs@taprk.com</u>                  | Telephone No.                                    | <u>720-360-4028</u>                       |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <u>Electronically Signed</u>                                                                                                                                                  | TITLE                                                                                                                                                                                                              | <u>Regulatory Manager</u>                 | DATE                         | <u>3/22/2022</u>           |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| Type or print name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <u>Christian Combs</u>                                                                                                                                                        | E-mail address                                                                                                                                                                                                     | <u>ccombs@taprk.com</u>                   | Telephone No.                | <u>720-360-4028</u>        |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| <b>For State Use Only:</b><br><table style="width:100%;"> <tr> <td>APPROVED BY:</td> <td><u>Patricia L Martinez</u></td> <td>TITLE</td> <td>_____</td> <td>DATE</td> <td><u>8/4/2022 7:59:55 AM</u></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                               |                                                                                                                                                                                                                    | APPROVED BY:                              | <u>Patricia L Martinez</u>   | TITLE                      | _____                     | DATE                                           | <u>8/4/2022 7:59:55 AM</u>                |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |
| APPROVED BY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <u>Patricia L Martinez</u>                                                                                                                                                    | TITLE                                                                                                                                                                                                              | _____                                     | DATE                         | <u>8/4/2022 7:59:55 AM</u> |                           |                                                |                                           |                                        |                                       |                                              |                                          |                                                  |                                           |                                               |                                         |                                            |           |              |      |                                                                   |      |        |      |     |   |      |     |      |   |  |      |   |   |          |      |       |       |       |    |     |   |      |      |      |   |  |      |   |   |          |      |             |      |     |    |      |      |       |      |      |   |  |  |  |   |

Apollo State Com 182H – Intermediate and Production

1/23/2022: Test BOPS. Drill 12.25 intermediate hole to 5265 ft.

1/30/2022: Run 9.625 inch 40.00 lb J-55 intermediate casing to 5250 ft. Pump 20 bbls vis water, followed by 595 sks of 10.5 ppg lead cmt, 458 sks of 14.8 ppg tail cmt. Drop plug and displace with 392 bbls of cut fresh water. 142 bbls cement to surface. EST TOC at 0 ft. Pressure test casing to 1500 for 30 minutes, good test.

2/28/2022: Drill 8.75 inch production hole to 9215 ft then switch to 6.75 inch to 20192 ft

3/11/2022: Run 5.5 inch 20 lb P-110 production casing to 20169 ft MD. Pump 20 bbls chem wash, 20 bbls vis water, then 474 sks of 10.5 ppg lead and 713 sks of 13.2 ppg tail cmt. Drop plug and displace with 20 bbls sugar water, 427 bbls brine. 0 bbls returned to surface. Est TOC at 1800 ft.

Intermediate Casing Details: Casing ran: 1/30/2022, Fluid Type Brine, Hole 12.25 inch to 5265 ft, Csg Size 9.625 inch, Weight 40lbs, Grade J-55, Est TOC 0 ft, Depth set 5250 ft, Cement 1053 sks, Yield 3.59 lead/1.33 tail, Class C, Pressure Held 1500 psi, Pres Drop 0.

Production Casing details: Casing Date: 3/11/2022, Fluid Type Oil Based Mud, Hole 8.75 inch hole to 9215 ft then switch to 6.75 inch to 20192 ft, Csg Size, 5.5 inch, Weight 20 lbs, Grade P-110, Depth set 20169 ft, EST TOC 1800 ft, Cement 1127 sacks, yield 3.44 lead/1.63 tail, Class TXI lead/Class C tail.

3/9/2022: TD Reached at 20192 ft MD, 9942 ft TVD.  
Plug Back Measured depth at 20121 ft MD, 9944 ft TVD.  
Rig Release on 3/11/2022 at 18:00.