| Submit To Appropriate District Office Two Copies State of New Mexico | | | | | | | | | Form C-105 | | | | | | | | | | | | | | | |
|--|---|--------------|---------------|---------------------------------------|----------|--------------------|--------|---------------|-------------------------|---|--|---|-------|---------------------------------|----------------|------|----------|--|--|--|--|--|--|--|
| District I Distr | | | | | | | | | | - | Revised April 3, 2017 | | | | | | | | | | | | | |
| District II | | | | | | | | | | 1. WELL API NO. 30-025-46126 | | | | | | | | | | | | | | |
| 811 S. First St., Artesia, NM 88210 District III District III | | | | | | | | | ı | 2. Type of Lease | | | | | | | | | | | | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | | | | | | | | | | - | STATE FEE FED/INDIAN 3. State Oil & Gas Lease No. VB 0179 | | | | | | | | | | | | | |
| A late on the same of the same | | | | | | | | | | | | | | | | | | | | | | | | |
| | WELL COMPLETION OR RECOMPLETION REPORT AND LOG 4. Reason for filing: | | | | | | | | | | - | Lease Name or Unit Agreement Name | | | | | | | | | | | | |
| | | | | | | | | | | HYPERION STATE | | | | | | | | | | | | | | |
| | | | | | | | | | | 6. Well Numb | er: | | | | | | | | | | | | | |
| #33; attach this ar | C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or 33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC) | | | | | | | | | | /or | 141H | | | | | | | | | | | | |
| 7. Type of Comp | | WORK | OVER C | DEEPE | NING | □PLUGBACk | | DIFFE | REN | IT RESERV | OIR | OTHER | | | | | | | | | | | | |
| | New Well | | | | | | | | | | | 9. OGRID 372043 | | | | | | | | | | | | |
| 10. Address of Op | | | | | | | | | | | | 11. Pool name or Wildcat | | | | | | | | | | | | |
| 602 PAF | | | | | | LDEN, CO | | | | | | TRIPLE X; BONE SPRING, WEST | | | | | | | | | | | | |
| 12.Location | Unit Ltr | Sect | ion | Township | | Range | Lot | | | Feet from t | | e N/S Line | | from the | E/W Line | | County | | | | | | | |
| Surface: | D | | 20 | | IS | 33E | | D | | 497 | _ | NORTH | | 460 | WEST | | LEA | | | | | | | |
| BH: | M | t. T.D. D | 20 | | IS | 33E | | М | 16 | 30 | | SOUTH | | 331 | WEST | | LEA | | | | | | | |
| 13. Date Spudded 7/24/2019 14. Date T.D. Reached 8/8/2019 15. Date Rig Released 8/10/2019 16. Date Completed (Ready to Produce) 9/24/2019 17. Elevations (DF a RT, GR, etc.) 3537 | | | | | | | | GR | | | | | | | | | | | | | | | | |
| 18. Total Measure 15424 | | | | 19. Plug Back Measured Depth 15373 | | | | | 20. Was Directional YES | | | Survey Made? 21. Type Electric and Other Logs Run N/A | | | ner Logs Run | | | | | | | | | |
| 22. Producing Interval(s), of this completion - Top, Bottom, Name 10138', 15289', 2ND BONE SPRING | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. | | | | | CAS | ING REC | ORI |) (R | epo | ort all str | ring | s set in w | ell) | | | | | | | | | | | |
| CASING SIZ | ZE | WEI | GHT LB. | | | DEPTH SET | | | НО | LE SIZE | | CEMENTIN | G RE | CORD | AMOU | NT I | PULLED | | | | | | | |
| 13.375 | | | 54.4 | 1264 | | | | 17.5 | | | 2750 SKS | | | | 0 | | | | | | | | | |
| 9.625 | 9.625 | | 40 20 | | | 51 54 | | | 12.25 8.75 | | | 1475 SKS 2380 SKS | | | 0 | | | | | | | | | |
| 3.3 | | | 20 | | | 10420 | | | | 0.73 | | 2300 | ONO | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. SIZE | TOD | | I DO | LINER RECORD BOTTOM SACKS CEMENT | | | CNIT | SCREEN SIZ | | | | | | D CET | | | | | | | | | | |
| N/A | | | ВО | ВОТТОМ | | SACKS CLIVILIVI SC | | SCK | | | | EMPTION RE | _ | EPTH SE | I PA | CKE | K SE I | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| 26. Perforation | record (ir | nterval, siz | e, and nu | mber) | | | | | | | FRA | CTURE, CE | | | | | | | | | | | | |
| | | | | | | | | | NTERVAL 88' - 15289' | AMOUNT AND KIND MATERIAL USED 13,092,200, 100 MESH | | | | | | | | | | | | | | |
| 10138' - 15289', 0.4", 1014 10138' - 15289' 13,092,200, 100 MESH | | | | | | | | | | | | | | | | | | | | | | | | |
| 28 | | | | | | - | DD (| DI | | TION | | | | | | | | | | | | | | |
| 28. Date First Produc | tion | | Produc | tion Metl | nod (Fla | | | | | | | Well Status | (Proc | d. or Shut | -in) | | | | | | | | | |
| 9/24/201 | Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) 9/24/2019 PRODUCING | | | | | | | | | | | | | | | | | | | | | | | |
| Date of Test | Date of Test Hours Tested | | Ch | Choke Size Prod'n For | | | | Oil - Bbl Gas | | - MCF | Water - Bbl. | | Ga | s - O | il Ratio | | | | | | | | | |
| 10/21/2019 | 24 HF | RS | 42 | 42/64 Test Period 1181 | | 154 | 3 | 2231 | | 13 | 1306 | | | | | | | | | | | | | |
| Flow Tubing | Casing | g Pressure | | lculated 2 | 24- | Oil - Bbl. | | . (| Gas - | MCF | . \ | Vater - Bbl. | | Oil Gra | vity - API - (| Corr | :) | | | | | | | |
| Press. N/A | 597 | | ır Rate 1181 | | | | 1543 2 | | | 2231 46 | | | | | | | | | | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) | | | | | | | | | | | 30. Test Witnessed By GARY JOHNSON | | | | | | | | | | | | | |
| 31. List Attachme | ents | | | | | | | | | | | | GAR | RY JOHN | SON | | | | | | | | | |
| 32. If a temporary | pit was u | ised at the | well, atta | ich a plat | with the | e location of the | tempo | rary pi | it. | | | | 33. R | ig Releas | e Date: 8/10/ | 2010 | <u> </u> | | | | | | | |
| 34. If an on-site burial was used at the well, report the exact location of the on-site burial: | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | Latitude | | | | | | Longitude | | | | NAI | 083 | | | | | | | |
| I hereby certif | fy that th | ne inform | nation s | shown o | F | Printed | | | | • | | | | | | | 1/1/2020 | | | | | | | |
| Signature Name CHRISTIAN COMBS Title REGULATORY MANAGER Date 1/1/2020 | | | | | | | | | | | | | | | | | | | | | | | | |
| E-mail Addres | SS ccomb | os@taprk | c.com | | | | | | | | | | | E-mail Address ccombs@taprk.com | | | | | | | | | | |

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

| | | Southeaste | ern New Mexico | Northwestern New Mexico | | | | | | | |
|----------------------------|----------|---|-------------------------------------|---------------------------|---------|---------------------------------|-----------------------------|--|--|--|--|
| RUSTL | ER 1250 | | 3RD BONE SPRING SAND 11978 | | | | | | | | |
| AP SA | LT 1764 | | 3RD BONE SPRG W SAND 12270 | | | | | | | | |
| BASE S | ALT 4950 |) | WOLFCAMP A X SAND 12346 | | | - | | | | | |
| DELAW | ARE MTN | N GRP 5205 | WOLFCAMP A Y SAND 12379 | | | | | | | | |
| AMAR | 5216 | | | | - | | , | | | | |
| ELL C | ANYON 5 | 238 | | | | | | | | | |
| RAMSE | Y 5261 | | | | | | | | | | |
| HERR | Y CANYO | ON 6174 | | | | | | | | | |
| RUSH | CANYON | N 7686 | | | | | | | | | |
| ONE S | SPRING 9 | 108 | | | | | | | | | |
| IPPER | AVALON | 19236 | | | | | | | | | |
| /IDDLI | E AVALO | N 9497 | | | | | | | | | |
| OWEF | RAVALON | N 9900 | - | | | | | | | | |
| ST BC | NE SPRII | NG SAND 10151 | | | | | | | | | |
| ND BC | NE SPRI | NG CARB 10469 | | | | | | | | | |
| 2ND BONE SPRING SAND 10928 | | | · · | | | | | | | | |
| 3RD BONE SPRING CARB 11359 | | | | | | | | | | | |
| o. 1. : | from | | to | No. 3 f | rom | | OIL OR GAS SANDS OR ZONI | | | | |
| n 2 | from | | to | No. 4 f | rom | • • • • • • • • • • • • • • • • | to | | | | |
| J. 2, | | ••••• | IMPORTANT V | VATER 9 | SAND | | | | | | |
| cluda | data or | rate of water | inflow and elevation to which water | | | . | | | | | |
| | | | | | | ft | | | | | |
| 0. 1, 1 | | • | | feetfeet | | | | | | | |
| 0. 2, I | irom | ••••• | | • • • • • • • • • • • • • | | ieet | •••••• | | | | |
| o. <i>3</i> , 1 | irom | | to | | | | | | | | |
| | | Ll | THOLOGY RECORD (A | Attach ad | ditiona | al sheet if n | ecessary) | | | | |
| | То | Thickness In Feet | Lithology | From | То | Thickness In Feet | Lithology | | | | |
| rom | | | | L | | | | | | | |
| rom | | | | | | | | | | | |

| From | То | Thickness In Feet | Lithology | From | То | Thickness In Feet | Lithology |
|------|----|----------------------|-----------|------|----|----------------------|-----------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | ı | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | H | |
| | | | | | | | |