STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION

APPLICATION OF TAP ROCK RESOURCES, LLC FOR COMPULSORY POOLING, LEA COUNTY, NEW MEXICO

Case No. 22136

NOTICE OF FILING

Tap Rock Resources, LLC hereby submits Replacement Exhibit E (the Pooling Checklist) in the above case, which is necessary due to the original checklist containing an incorrect API number.

Respectfully submitted,

James Bruce

Post Office Box 1056

Santa Fe, New Mexico 87504

(505) 982-2043

jamesbruc@aol.com

Attorney for Tap Rock Resources, LLC

COMPULSORY POOLING APPLICATION CHECKLIST ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Date	September 23, 2021
Applicant	Tap Rock Resources, LLC
	Tap Rock Operating, LLC / OGRID No. 372043
Designated Operator & OGRID (affiliation if applicable)	Operator is operating entity for applicant
Applicant's Counsel:	James Bruce
Case Title:	Application of Tap Rock Resources, LLC for Compulsory
Case Title.	Pooing, Lea County, New Mexico
Entries of Appearance/Intervenors:	G,
Well Family	The Contest Wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring Formation
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Bone Spring Formation
Pool Name and Pool Code:	Red Hills; Bone Spring, North (Pool Code 96434)
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter sections / 40 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	160 acres
Building Blocks:	40 acres
Orientation:	North-South
Description: TRS/County	E/2W/2 Section 9-24S-34E, NMPM, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibits B-2 and B-3
Well(s)	
Name & API (if assigned), surface and bottom hole location,	The Contest Fed Com Well #142H
footages, completion target, orientation, completion status	API No: 30-025-46877
(standard or non-standard)	SHL: 1401 FSL & 1297 FWL Section 9
	BHL: 30 FNL & 1980 FWL Section 9
	FTP: 100 FSL & 1980 FWL Section 9
	LTP: 100 FNL & 1980 FWL Section 9
	Formation: Bone Spring / TVD 10287 feet/MD 15697 feet
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Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$7,000
Production Supervision/Month \$	\$700
lustification for Supervision Costs	Exhibit B Page 3
Requested Risk Charge	Cots + 200% / Exhibit B Page 3
Notice of Hearing	
Proposed Notice of Hearing	1 1 1
Proof of Mailed Notice of Hearing (20 days before hearing)	Replacement EXHIBIT F
Proof of Published Notice of Hearing (10 days before hearing)	EXHIBIT C

Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit B-2
Tract List (including lease numbers and owners)	Exhibits B-2 and B-3
Pooled Parties (including ownership type)	Exhibit B-3
Unlocatable Parties to be Pooled	EXIMATE D 5
Ownership Depth Severance (including percentage above &	
	None
below) Joinder	WORLD
Sample Copy of Proposal Letter	Exhibit B-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibit B-3
	Exhibit B
Chronology of Contact with Non-Joined Working Interests	EXHIBIT B
Overhead Rates In Proposal Letter	Exhibit B-5
Cost Estimate to Drill and Complete	Exhibit B-5
Cost Estimate to Equip Well	
Cost Estimate for Production Facilities	Exhibit B-5
Geology	E Libro
Summary (including special considerations)	Exhibit C
Spacing Unit Schematic	Exhibit C-6
Gunbarrel/Lateral Trajectory Schematic	Exhibit C-7
Well Orientation (with rationale)	Standup / Exhibit C
Target Formation	Bone Spring
HSU Cross Section	Exhibit C-9
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit B-1
Tracts	Exhibit B-2
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits B-2 and B-3
General Location Map (including basin)	Exhibit C-6
Well Bore Location Map	Exhibits C-6, C-7, and C-8
Structure Contour Map - Subsea Depth	Exhibit C-8
Cross Section Location Map (including wells)	Exhibit C-8
Cross Section (including Landing Zone)	Exhibit C-9
Additional Information	
Special Provisions/Stipulations	
CERTIFICATION: I hereby certify that the information prov	ided in this checklist is complete and accurate.
Printed Name (Attorney or Party Representative):	JAMES BRUCE
Signed Name (Attorney or Party Representative):	(Milles Breco
Date:	10/20/21