

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address TAP ROCK OPERATING, LLC 523 PARK POINT DRIVE, SUITE 200 GOLDEN, CO 80401		<sup>2</sup> OGRID Number 372043	
		<sup>3</sup> Reason for Filing Code/ Effective Date NW RC	
<sup>4</sup> API Number 30 - 0 25-34165	<sup>5</sup> Pool Name TRIPLE X; BONESPRING, WEST		<sup>6</sup> Pool Code 96674
<sup>7</sup> Property Code 330259	<sup>8</sup> Property Name Enron 9 State Com		<sup>9</sup> Well Number 1

II. <sup>10</sup> Surface Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
O	9	24S	33E	-	660	South	1980	East	LEA

<sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
O	9	24S	33E	-	660	South	1980	East	LEA
<sup>12</sup> Lse Code S	<sup>13</sup> Producing Method Code F		<sup>14</sup> Gas Connection Date 5/5/2021		<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date		<sup>17</sup> C-129 Expiration Date	

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W

IV. Well Completion Data

<sup>21</sup> Spud Date 10/28/1997	<sup>22</sup> Ready Date 5/1/2021	<sup>23</sup> TD 13891	<sup>24</sup> PBTD 13845	<sup>25</sup> Perforations 11722' - 11735'	<sup>26</sup> DHC, MC	
<sup>27</sup> Hole Size		<sup>28</sup> Casing & Tubing Size		<sup>29</sup> Depth Set		<sup>30</sup> Sacks Cement
17.5"		13.375"		761'		540 SKS
12.25"		9.625"		5212'		2750 SKS
8.5"		7"		12580'		1050 SKS
6.125"		4.5"		13891		220 SKS

V. Well Test Data

<sup>31</sup> Date New Oil 5/5/2021	<sup>32</sup> Gas Delivery Date 5/5/2021	<sup>33</sup> Test Date 5/15/2021	<sup>34</sup> Test Length 24 Hrs	<sup>35</sup> Tbg. Pressure 21	<sup>36</sup> Csg. Pressure 0
<sup>37</sup> Choke Size 26/64	<sup>38</sup> Oil 97	<sup>39</sup> Water 28	<sup>40</sup> Gas 59		<sup>41</sup> Test Method Flowing
<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: Ramsey			OIL CONSERVATION DIVISION		
Printed name: Bill Ramsey			Approved by: PATRICIA MARTINEZ		
Title: Regulatory Analyst			Title: PETROLEUM SPECIALIST		
E-mail Address: bramsey@taprk.com			Approval Date: 10/6/2021		
Date: 9/2/2021		Phone: 720-238-2787			

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office  
☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-34165	<sup>2</sup> Pool Code 96674	<sup>3</sup> Pool Name Triple X; Bonespring, West
<sup>4</sup> Property Code 320799	<sup>5</sup> Property Name Enron 9 State Com	<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 372043	<sup>8</sup> Operator Name Tap Rock Operating, LLC	<sup>9</sup> Elevation 3612


<sup>10</sup> Surface Location

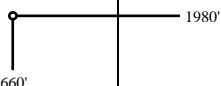
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
O	9	24 S	33 E		660	South	1980	East	LEA


<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<sup>12</sup> Dedicated Acres 320	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.						

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<sup>16</sup>				SEC 9	<sup>17</sup> OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i>  10/5/2021 Signature Date Bill Ramsey Printed Name bramsey@taprk.com E-mail Address
					<sup>18</sup> SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i> Date of Survey Signature and Seal of Professional Surveyor: Certificate Number



Submit To Appropriate District Office Two Copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 811 S. First St., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>			<b>Form C-105</b> Revised April 3, 2017													
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>								1. WELL API NO. 30-025-34165										
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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)								5. Lease Name or Unit Agreement Name <b>Enron 9 State Com</b>										
								6. Well Number:  1										
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input checked="" type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER																		
8. Name of Operator <b>TAP ROCK OPERATING, LLC</b>							9. OGRID 372043											
10. Address of Operator <b>523 PARK POINT DRIVE, SUITE 200, GOLDEN, CO</b>							11. Pool name or Wildcat <b>TRIPLE X;BONE SPRING, WEST</b>											
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County								
<b>Surface:</b>	O	9	24-S	33-E		660	SOUTH	1980	EAST	LEA								
<b>BH:</b>	O	9	24-S	33-E		660	SOUTH	1980	EAST	LEA								
13. Date Spudded 10/28/1997	14. Date T.D. Reached		15. Date Rig Released			16. Date Completed (Ready to Produce) 5/1/2021		17. Elevations (DF and RKB, RT, GR, etc.) 3612 GR										
18. Total Measured Depth of Well 13891'			19. Plug Back Measured Depth 13845'			20. Was Directional Survey Made? No		21. Type Electric and Other Logs Run No										
22. Producing Interval(s), of this completion - Top, Bottom, Name 11722' - 11735'							TRIPLE X;BONE SPRING, WEST											
<b>23. CASING RECORD (Report all strings set in well)</b>																		
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED								
13.375"		68		761'		17.5"		540 sks										
9.625"		47		5212'		12.25"		2750 sks										
7"		29		12580'		8.5"		1050 sks										
4.5"		15.1		13891'		6.125"		220 sks										
<b>24. LINER RECORD</b>																		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		25. TUBING RECORD												
						SIZE	DEPTH SET	PACKER SET										
26. Perforation record (interval, size, and number)  Perforate from 11722 to 11735 ft 3 SPF, .39 inch holes with 39 total shots						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td>11722' - 11735'</td> <td>1 stage frac with 191,400 lbs of 100 mesh sand</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table>					DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	11722' - 11735'	1 stage frac with 191,400 lbs of 100 mesh sand				
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED																	
11722' - 11735'	1 stage frac with 191,400 lbs of 100 mesh sand																	
<b>28. PRODUCTION</b>																		
Date First Production 5/5/2021		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing												
Date of Test 5/15/2021	Hours Tested 24	Choke Size 26	Prod'n For Test Period	Oil - Bbl 97	Gas - MCF 59	Water - Bbl. 28	Gas - Oil Ratio 608											
Flow Tubing Press. 21	Casing Pressure 0	Calculated 24-Hour Rate	Oil - Bbl. 97	Gas - MCF 59	Water - Bbl. 28	Oil Gravity - API - (Corr.)												
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold							30. Test Witnessed By											
31. List Attachments																		
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.								33. Rig Release Date:										
34. If an on-site burial was used at the well, report the exact location of the on-site burial:																		
Latitude			Longitude			NAD83												
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief																		
Signature 			Printed Name Bill Ramsey		Title Regulatory Analyst			Date 5/17/2021										
E-mail Address bramsey@t+																		

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.

[illegible]

No. 1, from.....to.....  
No. 2, from.....to.....  
No. 3, from.....to.....  
No. 4, from.....to.....

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....  
 No. 2, from.....to.....feet.....  
 No. 3, from.....to.....feet.....

From	To	Thickness In Feet	Lithology
5208	9111	3903	Delaware Sand & Shale
9111	12301	3190	Bone Spring Sand & Shale
12301	13891	1590	Wolfcamp

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**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

ACKNOWLEDGMENTS

Action 49733

**ACKNOWLEDGMENTS**

Operator: TAP ROCK OPERATING, LLC 523 Park Point Drive Golden, CO 80401	OGRID: 372043
	Action Number: 49733
	Action Type: [C-104] Completion Packet (C-104C)

**ACKNOWLEDGMENTS**

<input checked="" type="checkbox"/>	I hereby certify that the required Water Use Report has been, or will be, submitted for this wells completion.
<input checked="" type="checkbox"/>	I hereby certify that the required FracFocus disclosure has been, or will be, submitted for this wells completion.

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CONDITIONS  
  
Action 49733

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Operator: TAP ROCK OPERATING, LLC 523 Park Point Drive Golden, CO 80401	OGRID: 372043
	Action Number: 49733
	Action Type: [C-104] Completion Packet (C-104C)

CONDITIONS

Created By	Condition	Condition Date
plmartinez	None	10/6/2021