

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 Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505	Form C-103 August 1, 2011 Permit 302747 WELL API NUMBER 30-025-47428 5. Indicate Type of Lease S 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name APOLLO STATE COM																				
SUNDRY NOTICES AND REPORTS ON WELLS (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: O		8. Well Number 202H																				
2. Name of Operator TAP ROCK OPERATING, LLC		9. OGRID Number 372043																				
3. Address of Operator 523 Park Point Drive, Suite 200, Golden, CO 80401		10. Pool name or Wildcat																				
4. Well Location Unit Letter <u>N</u> : <u>856</u> feet from the <u>S</u> line and feet <u>2135</u> from the <u>W</u> line 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.) 3537 GR																						
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <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: Perforations/Tubing <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: Perforations/Tubing <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: Perforations/Tubing <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: Attach wellbore diagram of proposed completion or recompletion. Spud well on 6/1/2020 at 13:30 8/4/2020: TD Reached at 22866 ft MD, 12468 ft TVD. Plug Back Measured depth at 22798 ft MD, 12468 ft TVD. Rig Release on 8/6/2020 at 11:00. 9/2/2021: Pressure test casing to 5030 psi for 30 minutes, good test. 9/2/2021 to 10/4/2021: Perforate from 12610 ft to 22714 ft, 1 SPF, .55 inch holes with 518 total shots. 37 stage frac with 26,961,440 lbs of 100 mesh sand. 10/12/2021 to 10/13/2021: Drill out plugs 10/14/2021: Ready to produce <div style="text-align: center;"> Perforations Pool: WC-025 G-09 S243310P; UPPER WOLFCAM , 98135 Location: C -16-24S-33E 31 N 2308 W </div> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TOP</td> <td style="width:10%;">BOT</td> <td style="width:10%;">Open Hole</td> <td style="width:10%;">Shots/ft</td> <td style="width:10%;">Shot Size</td> <td style="width:10%;">Material</td> <td style="width:10%;">Stimulation</td> <td style="width:10%;">Amount</td> </tr> <tr> <td>12610</td> <td>22714</td> <td>N</td> <td>1</td> <td>0.55</td> <td>Sand</td> <td>Frac</td> <td>26961440</td> </tr> </table> <div style="text-align: center;"> Tubing </div>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	12610	22714	N	1	0.55	Sand	Frac	26961440				
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount															
12610	22714	N	1	0.55	Sand	Frac	26961440															
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 NMOC 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>10/21/2021</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>10/21/2021</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>10/21/2021</u>																	
Type or print name	<u>Christian Combs</u>	E-mail address	<u>ccombs@taprk.com</u>	Telephone No.	<u>720-360-4028</u>																	
For State Use Only: <table style="width:100%;"> <tr> <td>APPROVED BY:</td> <td><u>Paul F Kautz</u></td> <td>TITLE</td> <td><u>Geologist</u></td> <td>DATE</td> <td><u>11/9/2021 7:53:38 AM</u></td> </tr> </table>			APPROVED BY:	<u>Paul F Kautz</u>	TITLE	<u>Geologist</u>	DATE	<u>11/9/2021 7:53:38 AM</u>														
APPROVED BY:	<u>Paul F Kautz</u>	TITLE	<u>Geologist</u>	DATE	<u>11/9/2021 7:53:38 AM</u>																	