

<b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 <b>District II</b> 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 <b>District IV</b> 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Oil Conservation Division</b> <b>1220 S. St Francis Dr.</b> <b>Santa Fe, NM 87505</b>	Form C-103 August 1, 2011 Permit 330611 WELL API NUMBER 30-015-48981 5. Indicate Type of Lease Private 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name PLINY THE ELDER FEE																
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		8. Well Number 231H																
1. Type of Well: Gas	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>D</u> : <u>1002</u> feet from the <u>N</u> line and feet <u>354</u> from the <u>W</u> line Section <u>4</u> Township <u>23S</u> Range <u>27E</u> NMPM _____ County <u>Eddy</u>																		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3148 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																		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: <b>Perforations/Tubing</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: Attach wellbore diagram of proposed completion or recompletion.																		
11/4/2022: Pressure test casing to 5000 psi for 30 minutes, good test. 11/11/2022 to 11/23/2022: Perforate from 9785 ft to 19543 ft, 1 SPF, .55 inch holes with 481 total shots. 37 stage frac with 23,893,929 lbs of 100 mesh sand. 11/26/2022 to 11/28/2022: Drill out plugs Plug Back Measured depth at 19612 ft MD, 9240 ft TVD. 11/29/2022: Ready to produce <div style="text-align: center;"> <b>Perforations</b>  <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>TOP</th> <th>BOT</th> <th>Open Hole</th> <th>Shots/ft</th> <th>Shot Size</th> <th>Material</th> <th>Stimulation</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>9785</td> <td>19543</td> <td>N</td> <td>1</td> <td>0.55</td> <td>Sand</td> <td>Frac</td> <td>23893929</td> </tr> </tbody> </table> </div> <div style="text-align: center;"> <b>Tubing</b> </div>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	9785	19543	N	1	0.55	Sand	Frac	23893929
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount											
9785	19543	N	1	0.55	Sand	Frac	23893929											
Pool: <b>PURPLE SAGE; WOLFCAMP (GAS) , 98220 Location: D -4-23S-27E 1002 N 354 W</b>																		
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"/> .																		
SIGNATURE	<u>Electronically Signed</u>	TITLE <u>Regulatory Manager</u> DATE <u>12/14/2022</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>																		
APPROVED BY:	<u>Sarah K McGrath</u>	TITLE <u>Petroleum Specialist - A</u> DATE <u>9/14/2023 4:32:51 PM</u>																