Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELL					L	FORM A OMB NO Expires: Ja	D. 1004-	-0137	
			ELLS			5. Lease Serial No. NMNM85891			
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					F	6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on page 2						7. If Unit or CA/Agreement, Name and/or No.			
I. Type of Well ☐ Oil Well ⊠ Gas Well ☐ Other						8. Well Name and No. CYPRESS 34 23S29E3434 236H			
2. Name of Operator TAP ROCK OPERATING LLC Contact: CHRISTIAN CO E-Mail: CCOMBS@TAPRK.COM						9. API Well No 30-015-45262-00-X1			
3a. Address 602 PARK POINT DRIVE SU GOLDEN, CO 80401	IITE 200	3b. Phone No Ph: 720-36		code)) 10. Field and Pool or Exploratory Area PURPLE SAGE-WOLFCAMP (GAS)			ory Area FCAMP (GAS)	
4. Location of Well (Footage, Sec., 2	T., R., M., or Survey Description	1)		1		11. County or Parish, S	State		
Sec 3 T24S R29E 210FNL 1032FEL 32.253418 N Lat, 103.967224 W Lon						EDDY COUNTY	′, NM		
12. CHECK THE A	PPROPRIATE BOX(ES)	TO INDICA	TE NATUI	RE OF	F NOTICE, F	REPORT, OR OTH	IER D	АТА	
TYPE OF SUBMISSION			TY	PE OF	F ACTION				
□ Notice of Intent	Acidize	Dee 🗌	pen		Productio	on (Start/Resume)	D W	/ater Shut-Off	
—	□ Alter Casing	·	Iraulic Fracti	-	🗖 Reclamat	ion		ell Integrity	
Subsequent Report	Casing Repair	—	v Constructio		Recomple		X O Hyd	ther raulic Fracture	
Final Abandonment Notice	Change Plans		g and Aband	on		rily Abandon	i i y d		
13. Describe Proposed or Completed Op	Convert to Injection		-	atartina	U Water Di	-	vimata d	lumion thereof	
If the proposal is to deepen direction Attach the Bond under which the wo following completion of the involve testing has been completed. Final A determined that the site is ready for	nally or recomplete horizontally, ork will be performed or provide d operations. If the operation re bandonment Notices must be fi	, give subsurface e the Bond No. or esults in a multipl	locations and n file with BL le completion	measure M/BIA. or recon	ed and true vert Required subs mpletion in a ne	cical depths of all pertin equent reports must be w interval, a Form 316	ent marl filed wi 0-4 mus	kers and zones. Ithin 30 days It be filed once	
 12/10/18 Rig released 3/9/19 start toe prep, test 5" a sleeve at 8050psi. 3/11/19 begin perf & frac 3/21/19 finish 22 stage frac. 1 		•				obls			
fluid. √3/30/19 drilled out plugs, PBTD 16004' √3/31/19 opened well to flowback GCC Accepted for				MOCD		RECEIVED			
			2/12/N			FEB 1 0 2020			
		Accebaca 100	_			EMNRD	-0C	DARTESI	
14. I hereby certify that the foregoing i	is true and correct.					• •			
•	Electronic Submission # For TAP ROC	K OPERATING	LLC, sent	to the	Carlsbad	-			
Committed to AFMSS for processing by PR Name(Printed/Typed) CHRISTIAN COMBS				EZ on 01/31/2020 (20PP10)					
				-001/					
Signature (Electronic	Submission)		Date 01	/29/20	020				
	THIS SPACE F	OR FEDER	L OR ST	ATE C	OFFICE US	E			
		<u> </u>			N SHEPARE				
Approved By ACCLF		—			UM ENGINE	ER		Date 02/08/202	
Conditions of approval, if any, are attach certify that the applicant holds legal or ea which would entitle the applicant to cond	quitable title to those rights in th		Office Ca	rlsbad	ł				
Title 18 U.S.C. Section 1001 and Title 4 States any false, fictitious or fraudulent	3 U.S.C. Section 1212, make it a t statements or representations a	a crime for any p s to any matter w	erson knowing vithin its jurise	gly and sliction.	willfully to mal	ke to any department or	agency	of the United	
(Instructions on page 2) ** BLM REV	/ISED ** BLM REVISE	D ** BLM R	EVISED **	BLM		** BLM REVISE	D **		
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		 -	A 48 3 A						

Revisions to Operator-Submitted EC Data for Sundry Notice #501363

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	Operator Submitted	BLM	Revised (AF
Sundry Type:	HF SR	HF SR	
Lease:	NMNM85891	NMNN	85891
Agreement:			
Operator:	TAP ROCK OPERATING LLC 602 PARK POINT DRIVE, SUITE 200 GOLDEN, CO 80401 Ph: 720-772-5090	602 PA GOLD	OCK OPERATIN ARK POINT DRIV EN, CO 80401 20.772.5090
Admin Contact:	CHRISTIAN COMBS REGULATORY MANAGER E-Mail: ccombs@taprk.com	REGU	TIAN COMBS LATORY MANA(CCOMBS@TAF
	Ph: 720-360-4028	Ph: 72	20-360-4028
Tech Contact:	CHRISTIAN COMBS REGULATORY MANAGER E-Mail: ccombs@taprk.com	REGU	TIAN COMBS LATORY MANAG CCOMBS@TAF
	Ph: 720-360-4028	Ph: 72	20-360-4028
Location: State: County:	NM EDDY		
Field/Pool:	PURPLE SAGE WOLFCAMP	PURP	LE SAGE-WOLF
Well/Facility:	CYPRESS 34 23S29E3434 236H Sec 3 T24S R29E Mer NMP NENE 210FNL 1032FEL	Sec 3	ESS 34 23S29E3 T24S R29E 210F 8418 N Lat, 103.9

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FMSS)

ING LLC RIVE SUITE 200

AGER APRK.COM

AGER APRK.COM

FCAMP (GAS)

E3434 236H 0FNL 1032FEL 967224 W Lon