Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	Zinongy, interests and industrial recognition		WELL API NO. 30-025-40974
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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			Jackson Unit
PROPOSALS.)			8. Well Number <sub>18H</sub>
1. Type of Well: Oil Well   2. Name of Operator	Gas Well Other OCD - HOLD OCT VED		9. OGRID Number
2. Name of Operator TAP ROCK OPERATING, LLC  RECEIVED		372043	
3. Address of Operator			10. Pool name or Wildcat
602 PARK POINT DR, SUITE 200, GOLDEN, CO 80401		TRIPLE X; BONE SPRING, WEST	
4. Well Location			
Unit Letter M : 200 feet from the South line and 770 feet from the West line			
Section 21 Township 24S Range 33E NMPM County Lea			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3532 GR			
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   P AND A    PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   P AND A    OTHER: OTHER: Shut in Well   Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  Due to current market prices, Tap Rock has decided to shut in the Jackson Unit 18H wellbore. The well was shut in on 4/1/2020 and plans to remain shut in until pricing has risen to an adequate economic level to produce.			
ACCEPTED FOR RECORD ONLY RECORD SI Status submit ACO To apply for SI Status			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE_	TITLE Re	gulatory Analyst	DATE 4/21/2020
T. · A Rill Ramsev			
Type or print name Bill Ramsey For State Use Only	E-mail add	lress: bramsey@taprk.c	PHONE: 720-360-4028
1 of State Ost Omy			
APPROVED BY:Conditions of Approval (if any):	TITLE		DATE