Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283		30-025-41437
811 S. First St. Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 OCD – 1 District IV – (505) 476-3460	1220 South St. Francis Dr.	STATE X FEE
District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	u-	
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 PROPOSALS.)	ON FOR PERMIT" (FORM C-101) FOR SUCH	Bettis 20 State Com
1. Type of Well: Oil Well Gas Well Other		8. Well Number _{003H}
2. Name of Operator TAP ROCK OPERATING, LLC		9. OGRID Number 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		Thiple X, Boile opining, west
Unit Letter O : 200	feet from the South line and 226	feet from the East line
Section 20	Township 24S Range 33E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3533 GR		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Due to current market prices, Tap Rock has decided to shut in the Bettis 20 State Com 003H wellbore. The well was shut in on 3/31/2020 and plans to remain shut in until pricing has risen to an adequate economic level to produce.		
I hereby certify that the information above	ACCEPTED FOR RECORD ON ACCEPTED FOR RECORD ON ACCEPTED FOR SI Status submit ACCEPTED For SI Status submit ACCEPTED FOR SI Status submit ACCEPTED FOR RECORD ON ACCEPTED FOR SI Status submit ACCEPTED FOR SI STATUS SI S	
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SIGNATURE	Demokat A I I	4/04/00
SIGNATURE	TITLE Regulatory Analyst	DATE
Type or print name Bill Ramsey	E-mail address: bramsey@taprk.c	om PHONE: 720-360-4028
For State Use Only	E-iliali address.	I HONE.
202 State Coo Chij		
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE