

<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 302881 WELL API Number 30-025-47463 5. Indicate Type of Lease S 6. State Oil & Gas Lease No.  7. Lease Name or Unit Agreement Name POSEIDON STATE COM																																
<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.)																																		
1. Type of Well: O		8. Well Number 172H																																
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>723</u> feet from the <u>S</u> line and feet <u>1988</u> from the <u>W</u> line Section <u>9</u> Township <u>24S</u> Range <u>33E</u> NMPM _____ County <u>Lea</u>																																		
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3600 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: <u>Perforations/Tubing</u> <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. 10/15/2021 to 10/18/2021: Install gas lift and tubing it the Poseidon State Com 172H. Run 2.875 inch L-80 tubing to 9030 ft MD. Set packer at 9030 ft MD. Returned to production.																																		
<b>Perforations</b> <b>Pool: TRIPLE X; BONE SPRING, WEST , 96674 Location: C -4-24S-33E 30 N 2182 W</b> <table 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>9753</td> <td>14660</td> <td>N</td> <td>1</td> <td>0.55</td> <td>Sand</td> <td>Frac</td> <td>24754535</td> </tr> </tbody> </table> <b>Pool: TRIPLE X; BONE SPRING , 59900 Location: N -4-24S-33E 30 N 2182 W</b> <table 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>14660</td> <td>19755</td> <td>N</td> <td>1</td> <td>0.55</td> <td>Sand</td> <td>Frac</td> <td>24754535</td> </tr> </tbody> </table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	9753	14660	N	1	0.55	Sand	Frac	24754535	TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	14660	19755	N	1	0.55	Sand	Frac	24754535
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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"/>																																		
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