

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-45971
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V04096

SUNDRY NOTICES AND REPORTS ON WELLS
 (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: Oil Well Gas Well Other

7. Lease Name or Unit Agreement Name Poseidon State Com
--

2. Name of Operator
Tap Rock Operating LLC

8. Well Number #201
9. OGRID Number 372043

3. Address of Operator
602 Park Point Drive Suite 200 Golden CO 80401

10. Pool name or Wildcat [2220] Antelope Ridge, Wolfcamp

4. Well Location
 Unit Letter M : 347 feet from the S line and 1270 feet from the W line
 Section 9 Township 24S Range 33E NMPM Lea County

WC-025 G-09 S243310P; UPPER WOLFCAMP [98135]

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
--

**OCD - HOBBS
 07/31/2019
 RECEIVED**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
 PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 DOWNHOLE COMMINGLE
 CLOSED-LOOP SYSTEM
 OTHER:

SUBSEQUENT REPORT OF:
 REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 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.

Change unit size to encompass W/2 of Section 4 & W/2 of Section 9, T24S R33E

Spud Date: Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Erica Hixson TITLE Landman DATE 7/31/2019

Type or print name Erica Hixson E-mail address: ehixson@taprk.com PHONE: 720-460-3316
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 08/05/2019
 Conditions of Approval (if any):