Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	Zhorgy, minorais and reason resources	WELL API NO. 30-025-41086
<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  FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	CD - HOBBS 04/21/2020 04/21/2020 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505	RECEIVE	
	ICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLI	CATION FOR PERMIT" (FORM C-101) FOR SUCH	Jackson Unit
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well  Other	8. Well Number <sub>15H</sub>
2. Name of Operator TAP ROCK OPERATING, LL	C	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		
Omit Letter	200 feet from the North line and 200	
Section 15	Township 24S Range 33E  11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County Lea
	3612 GR	,
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS.   P AND A   PULL OR ALTER CASING   MULTIPLE COMPL   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.  Due to current market prices, Tap Rock has decided to shut in the Jackson Unit 15H wellbore. The well was shut in on 4/11/2020 and plans to remain shut in until pricing has risen to an adequate economic level to produce.		
	ACCEPTED FOR To apply for SI	R RECORD ONLY Status, submit ACO
Lhereby certify that the information	above is true and complete to the best of my knowledge	ge and belief
•	above is true and complete to the best of my knowledg	se and benefi.
SIGNATURE Range	TITLE Regulatory Analyst	DATE 4/21/2020
SIGNATURE		
Type or print name Bill Ramsey	E-mail address: bramsey@taprk.co	om PHONE: 720-360-4028
For State Use Only		
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE