

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

RECEIVED
 HOBBBS CD
 JAN 23 2020

WELL API NO. 30-025-46661
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name HYPERION STATE
8. Well Number 215H
9. OGRID Number 372043
10. Pool name or Wildcat
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3538 GR

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

2. Name of Operator
TAP ROCK OPERATING, LLC

3. Address of Operator
602 PARK POINT DR, SUITE 200, GOLDEN, CO 80401

4. Well Location
 Unit Letter D : 497 feet from the NORTH line and 565 feet from the WEST line
 Section 20 Township 24S Range 33E NMPM County LEA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Operator would like to run production casing with 5.5" 20" P-110HCY W521 Flush casing from 11,800' to 17,750' instead of the 5" 18# P-110 W521 Flush casing as originally permitted on the Hyperion State 215H. No other changes would result from this change to production casing plan.

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

SIGNATURE CCC TITLE Regulatory Manager DATE 1/22/2020

Type or print name Christian Combs E-mail address: ccombs@taprk.com PHONE: 720-360-4028

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 01/30/2020

Conditions of Approval (if any):