

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 South St Francis, Santa Fe, NM 87505

RECEIVED
State of New Mexico
Energy, Minerals and Natural Resources
APR 12 2004
OIL CONSERVATION DIVISION
1220 South St Francis
Conservation Division
Santa Fe, NM 87505
1220 South St Francis Drive
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-007-20458
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other COALBED METHANE		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator EL PASO ENERGY RATON, L.L.C.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 190 RATON, NM 87740		7. Lease Name or Unit Agreement Name: VPR D
4. Well Location Unit Letter L : 1637 feet from the South line and 610 feet from the West line Section 7 Township 30N Range 19E NMPM COLFAX County		8. Well No. 130
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 7,600' (GR)		9. Pool name or Wildcat

11. 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 PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> COMPLETION

12. 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 recompilation.

01/27/04 HES ran Cement Bond Log. Estimated Cement Top at surface.
03/18/04 HES perf'd 1st stage: 1533'-1535' 3 Holes
HES frac'd 1st stage: Pumped fracture treatment with 30,260 lbs of 16/30 Ottawa sand, Avg Pres 762 psi, Avg Rate 16.6 bbl/min.
HES perf'd 2nd stage: 1452'-1454' 3 Holes
HES frac'd 2nd stage: Pumped fracture treatment with 29,930 lbs of 16/30 Ottawa sand, Avg Pres 2427 psi, Avg Rate 16.1 bbl/min.
HES perf'd 3rd stage: 1345'-1350' 6 Holes
HES frac'd 3rd stage: Pumped fracture treatment with 13,260 lbs of 16/30 Ottawa sand, Avg Pres 3120 psi, Avg Rate 14.1 bbl/min.
HES perf'd 4th stage: 1300'-1302' 3 Holes
HES frac'd 4th stage: Pumped fracture treatment with 40,060 lbs of 16/30 Ottawa sand, Avg Pres 2208 psi, Avg Rate 17.9 bbl/min.
HES perf'd 5th stage: 980'-982' 3 Holes
HES frac'd 5th stage: Pumped fracture treatment with 20,380 lbs of 16/30 Ottawa sand, Avg Pres 1504 psi, Avg Rate 14.3 bbl/min.
03/20/04 Installed rods, tubing, and pump. Well is ready to be tested and put on production.

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

SIGNATURE Shirley Mitchell TITLE Regulatory Analyst DATE 04/07/04
Type or print name: Shirley A. Mitchell Telephone No.: (505) 445-6785
(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 4/13/04
Conditions of approval, if any: