

180514 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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

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

WELL API NO.

30-007-20144

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

VPR D

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 Coalbed Methane

2. Name of Operator

EL PASO ENERGY RATON, L.L.C.

3. Address of Operator

P.O. Box 190, Raton, NM 87740

8. Well No. 11

9. Pool name or Wildcat

4. Well Location

Unit L : 1616 feet from the South line and 1070 feet from the West line

Section 5 Township 30N Range 18E NMPM Colfax County

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

8566' GL

11. 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 COMPLETION ☐

OTHER: Re-frac ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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 recompletion.

➤ Plan to re-perforate and re-stimulate the upper Vermejo coal interval 1720'- 1745'.

➤ Plan to fracture stimulate interval with @ 64,000 lbs. of sand in 1 stage.

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

SIGNATURE Donald R. Lankford TITLE Production Manager DATE 06/21/04

Type or print name Donald R. Lankford Telephone No. (505) 445-6721

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 6/25/04

Conditions of approval, if any: