

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

2009 FEB 23 PM 1 55

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. <b>30-007-20892</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Salt Water Disposal		7. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>EL PASO E &amp; P COMPANY, L.P.</b>		7. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. BOX 190, RATON, NM 87740</b>		7. Lease Name or Unit Agreement Name <b>VPR A</b>
4. Well Location Unit Letter <b>O</b> : <b>332</b> feet from the <b>South</b> line and <b>2549</b> feet from the <b>East</b> line Section <b>30</b> Township <b>31N</b> Range <b>21E</b> <b>NMPM</b> <b>Colfax</b> County		8. Well Number <b>500</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>7,960' (GL)</b>		9. OGRID Number
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 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"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>SECOND RE-COMPLETION</b>	<input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

02/04/09 MIRU Animas Rig. TOOH with 4.5 Tubing.  
02/05/09 RU Superior Wireline.  
Stage 1 - Original Glorieta (6427'- 6528') added (6430'- 6460', 6470'- 6500', 6515'- 6555')  
RePerf 6360'- 6372', 6594'- 6605', 6620'- 6632' 140 Holes Treated with 8,000 gals HCL Acid 15%.  
Stage 2 - Original Entrada (5982'- 6065') added (5985'- 5995', 6010'- 6040', 6050'- 6060')  
RePerf 6225'- 6235', 6240'- 6245' 60 Holes Treated with 5,400 gals HCL Acid 15%.  
Stage 3 - Original Dakota (5452'- 5617') added (5460'- 5480', 5490'- 5520', 5540'- 5580', 5590'- 5600')  
RePerf 5765'- 5775', 5910'- 5927' 108 Holes Treated with 7,400 gals HCL Acid 15%.  
02/13/09 Clean out hole to PBTD 6,688'. Set end of Injection Packer at 5,427' with PBR top at 5,409'.  
02/14/09 TIH with seal assembly, 4 1/2", LT&C, 11.60 PPF, injection string. Landed in PBR at 5,409'.  
02/15/09 Installed wellhead. Secure well.  
02/17/09 MIT test to 1,500 psi. Held 30 minutes with 10 psi leak off. Well ready for injection.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Shirley Mitchell TITLE Regulatory Analyst DATE 02/18/2009  
Type or print name Shirley Mitchell E-mail address: shirley.mitchell@elpaso.com Telephone No. (303) 291-6420  
For State Use Only

APPROVED BY: Ed Martin TITLE DISTRICT SUPERVISOR DATE 2/23/09  
Conditions of Approval (if any):