Office Submit 5 Copies To Appropriate District	OLDIE OF INEW MEXICO				Form C-103
Energy, Minerals and Natural Resources			Revised March 25, 1999		
1625 N. French Dr., Hobbs, NM 87240				WELL API NO.	30-007-20082
District II 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION					
District III 2040 South Pacheco				5. Indicate Type	
1000 Rio Brazos Rd., Aztec, NM 87410 Conto Eq. NIM 97505			STATE C		
District IV 2040 South Pacheco, Santa Fe, NM 87505			6. State Oil & O	las Lease No.	
	AND DEPONTS OF	LINELLO			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				/. Lease Name or	Unit Agreement Name:
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				_	(/DD D
PROPOSALS.)				,	VPR B
1. Type of Well: Oil Well □ Gas Well ■ Other					~
2. Name of Operator				0 11/ 112/ 3	
EL PASO ENERGY RATON, L.L.C.				8. Well No. 2	6
3. Address of Operator				9. Pool name or V	Wildcat
P.O. BOX 190; RATON, NM 87740). Tool hame of	· ildout
4. Well Location					· · · · · · · · · · · · · · · · · · ·
Unit Letter_G:_24	13'feet from the	_NORTI	-1 line and $_{-}$ l	324'feet from the	neEASTline
	2017	400			
Section 25 Township 30N Range 18E NMPM COFAX County					
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 7807' (GR)					
11. Check Appro	prieto Dov to Inc			Domont on Other I	
		neate in			
				SEQUENT REI	
PERFORM REMEDIAL WORK PLO	JG AND ABANDON	Ш	REMEDIAL WORK	<	ALTERING CASING
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRI				LLING OPNS. PLUG AND	
PULL OR ALTER CASING MULTIPLE				ABANDONMENT -	
		CASING TEST AI		ND 🗆	
COMPLETION		CEMENT JOB			
OTHER:			OTHER: CHAI	NGE OF OPERATO	R 🔳
12.					
For the referenced well, the operator has	changed:				
, , , , , , , , , , , , , , , , , , , ,	g				
From: Sonat Raton, L.L.C.	To:		Energy Raton, L.I	L.C.	
P.O. Box 190 P.O. Box 190					
Raton, New Mexico 87740 Raton, New Mexico 87740					
I hereby certify that the information abov	e is true and comple	te to the b	est of my knowledg	ge and belief.	
2 2	• _				
SIGNATURE Signature			TROLEUM ENGIN	IEERDATE_	07/23/00
Type or print name: DON LANKFORD	Telephone No : (50)	5) 445 46	71		
) eleptione No.: (503	oj 445-46.	<u> </u>		
(This space for State use)	//	,	lowniew		, /
APPPROVED BY	Ku-	$TITLE^{D}$	ISTRICT SU	PERVISOR	DATE 8/7/00
Conditions of approval, if any	, , , , ,	HILE	**		DATE 6/1/05
Conditions of approval, if any					