Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 30-007-20150 1625 N. French Dr., Hobbs, NM 87240 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 STATE FEE Santa Fe, NM 87505 District IV State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE TEIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH VPR D PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other COALBED METHANE Name of Operator 8. Well No. 22 EL PASO ENERGY RATON, L.L.C. Address of Operator 9. Pool name or Wildcat P.O. BOX 190; RATON, NM 87740 4. Well Location Unit Letter___F__:__1739' feet from the North line and 2392'___ feet from the West line Township 31N Range 18E NMPM COLFAX County 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 8707' (GR) 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. TEMPORARILY ABANDON ☐ CHANGE PLANS **PLUG AND ABANDONMENT** PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: COMPLETION 12. 4/17/00 Ran CBL (Patterson). TOC surface. 7/12/00 Perforate: 1901'-1906', 1885'-1889', 1865'-1869', 1840'-1844'. All 4spf. 7/18/00 Stimulate: 140000# 20/40 Sand with 20# Delta 140 / Sandwedge. Perforate: 1810'- 1814',1786'- 1790'. All 4 spf. Stimulate with 1000 gals 15% HCl. Perforate: 1632'- 1639' (4 spf). Stimulate: 105000# 20/40 Sand with 20# Delta 140 / Sandwedge. Clean out to 1966'. Ran After frac Log (Patterson). Ran tubing & rods. Well ready for production. 7/20-21/00 I hereby certify that the information above is true and complete to the best of my knowledge and belief. **SIGNATURE** TITLE WELL SITE SUPERVISOR DATE 08/21/00 Type or print name: JOEL L. PETTIT Telephone No.: (505) 445-4620 (This space for State use)

Conditions of approval, if

THILE DISTRICT SUPERVISOR DATE 8/25/00