Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO. 30-007-20173	
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pacheco		STATE FEE	
District IV 2040 South Pacheco, Santa Fe, NM 87505	Santa Fe. NM 87505		6. State Oil & Gas Lease No.	
	ICES AND REPORTS ON WELLS	,	7. Lease Name or Unit Agreement Name:	
(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.)			VPR D	
1. Type of Well:			VIKD	
Oil Well Gas Well Other COALBED METHANE				
2. Name of Operator EL PASO ENERGY RATON, L.L.C.			8. Well No. 3	
3. Address of Operator			9. Pool name or Wildcat	
P.O. BOX 190; RATON, NM 87740 4. Well Location				
Unit Letter A: 1182' feet from the North line and 1298' feet from the East line				
Section 12 Township 30N Range 17E NMPM COFAX County				
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 8373' (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				
TEMPORARILY ABANDON			LING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING MULTIPLE CASING TEST AN COMPLETION CEMENT JOB			D	
OTHER:		OTHER: COMPLE	TION	
12.				
	son Wireline). TOC surface.			
6/24/00 Perforate: 1931' – 1937' (4 spf). Stimulate: 15000# 20/40 & 35500# 12/20 Sand. 398400 scf N2 70 Quality foam.				
6/28/00 Perforate: 1879'-1881', 1843'-1847'. All 4 spf.				
	Stimulate: 10000# 20/40 & 22000# 12/20 Sand. 280100 scf N2 70 Quality foam. Perforate: 1651' – 1660' (4spf).			
Stimulate: 20000# 20/40 & 81000 12/20 Sand. 825000 scf N2 70 Quality foam.				
7/10-11/00 Clean out to 1977'. Ran After frac Log (Patterson). Ran tubing & rods. Well ready for production.				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE foel L. Fellet TITLE WELL SITE SUPERVISOR DATE 8/16/00				
Type or print name. JOEL L. PETTIT Telephone No. (505) 445 - 4620				
(This space for State use)				
APPPROVED BY TY COMMENT TITLE DISTRICT SUPERVISOR DATE 8/25/00				
Conditions of approval, if any:				