Submit 3 Copies To Appropriate District	State of New Mexico				Form C-103
Office District I	Energy, Minerals and Natural Resources			Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 87240				WELL API	NO. 30-007-20190
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION			5 1 1 7	CI
District III	2040 South Pacheco			1	Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505			STAT	
District IV 2040 South Pacheco, Santa Fe, NM 87505	,			6. State Oil	l & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Nai	me 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 B
I. Type of Well:					
Oil Well Gas Well	Other				
2. Name of Operator				8. Well No.	15
SONAT RATON, LLC				0.7.1	*****
3. Address of Operator				9. Pool name	e or Wildcat
P.O. BOX 190; RATON, NM 87740					
4. Well Education					
Unit Letter H : 1366 feet from the North line and 887 feet from the East line					
Section 35 Towns	nip 30N Range	18E	NMPM CO	LFAX (County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)					
8143' (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 WOR	K	☐ ALTERING CASING ☐
TEMPORARILY ABANDON			COMMENCE DRI	PRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE		CASING TEST AND CEMENT JOB		
	COMPLETION		CEMENT JOB		
OTHER:			OTHER:		
12.			<u> </u>		
5/01/00 Spud well at 4:30 PM. Drill 11" hole to 350'. Run 8-5/8" casing to 335'. HES pumped 100 sx Midcon 2 +Adds. 4 Bbls cement returned to surface. WOC 2.5 hrs.					
5/02/00 WOC. Drilling 7-	·//8 Hole to 1D of 2393	•			
5/03/00 RU Patterson and log 2566' to 335'. Run 5-1/2" casing to 2565'. Cement with HES Mix and Pump 375 sx of cement. NO cement to surface. Release rig.					
I hereby certify that the information	above is true and compl	ete to the	best of my knowled	ge and belief.	
SIGNATURE					
Type or print name: DON LANKFORD Telephone No.: (505) 445-4621					
(This space for State use)					
APPPROVED BY TITLE DISTRICT SUPERVISOR DATE 5/19/00 Conditions of approval, if any:					
V					