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			WELLADING	Revised March 25, 1999
District II	OH CONCEDUATION DAMAGES			WELL API NO.	30-007-20192
811 South First, Artesia, NM 87210 District III	OIL CONSERVATION DIVISION			5. Indicate Type	of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pacheco				FEE FEE
<u>District IV</u> 2040 South Pacheco, Santa Fe. NM 87505	Santa Fe. NM 87505			6. State Oil &	
				<u> </u>	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name of	or Unit Agreement Name:
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH					VDD D
PROPOSALS.) 1. Type of Well:					VPR D
Oil Well Gas Well	Oil Well Gas Well Other				~
2. Name of Operator				8. Well No.	5
EL PASO ENERGY RATON, L.L.C.				o. Well No.	3
3. Address of Operator				9. Pool name or	Wildcat
P.O. BOX 190; RATON, NM 87740 4. Well Location					
Wen Boomion					
Unit LetterH:	1478' feet from the N	lorth	line and 1305'	feet from the	act line
Unit Letter H : 1478' feet from the North line and 1305' feet from the East line					
Section 7 Township 30N Range 18E NMPM COLFAX County					
10. Elevation (Show whether DR, RKB, RT, GR, etc.)					
11 Check Appropriate Boy to Indicate Notice of State of S					
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				SEQUENT RE	
TEMPODADII WADANDON				_	ALTERING CASING
COMMENCE DATE				LING OPNS.	PLUG AND
PULL OR ALTER CASING MULTIPLE CASING TEST AN				D [ABANDONMENT L
	COMPLETION		CEMENT JOB		
OTHER:			OTHER: CHANG	GE OF OPERATOR	
12.			on the state of th	SE OF OFERATOR	
For the referenced well, the operator	· has changed:				
From: Sonat Raton, L.L					
P.O. Box 190	C. To:		Energy Raton, L.I	C.	
Raton, New Mexico 87740 P.O. Box 190 Raton, New Mexico 87740 Raton, New Mexico 87740					
	20 07740	Katon, 1	vew Mexico 8//40		
I heraby cartify that the information I					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE RUST DATE 07/23/00					
Type or print name: DON LANKFORD Telephone No.: (505) 445-4621					
(This space for State use)					
APPPROVED BY Conditions of approval, if any: TITLE DISTRICT SUPERVISOR DATE 8/7/00					
Conditions of approval, if any: DATE 0///00					