

Form C-104
Revised March 25, 1999

Submit to Appropriate District Office
5 Copies

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address EL PASO ENERGY – RATON, L.L.C. PO BOX 190 RATON, NEW MEXICO 87740		² OGRID Number 180514
		³ Reason for Filing Code RE
⁴ API Number 30-007-20270	⁵ Pool Name Castle Rock Park – Vermejo Gas	⁶ Pool Code 97046
⁷ Property Code 25179	⁸ Property Name VPR 'D'	⁹ Well Number 55

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
N	36	31N	17E		881.9	FSL	1881.6	FWL	COLFAX

¹¹ Bottom Hole Location

UL or lot no. N	Section 36	Township 31N	Range 17E	Lot Idn	Feet from the 881.9	North/South line FSL	Feet from the 1881.6	East/West line FWL	County COLFAX
¹² Lse Code	¹³ Producing Method Code P		¹⁴ Gas Connection Date 02/26/02		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

[illegible]

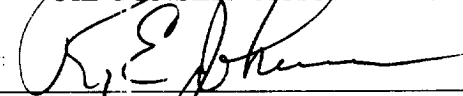
IV. Produced Water

13 POD	24 POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date 01/02/02	²⁶ Ready Date 02/19/02	²⁷ TD 1735'	²⁸ PBDT 1531'	²⁹ Perforations 1240' – 1470'	³⁰ DHC, MC
³¹ Hole Size	³² Casing & Tubing Size		³³ Depth Set	³⁴ Sacks Cement	
11"	8 5/8"		330'	85 sx	
7 7/8"	5 1/4"		1593'	255 sx	

VI. Well Test Data

³⁵ Date New Oil N/A	³⁶ Gas Delivery Date 02/26/02	³⁷ Test Date 02/26/02	³⁸ Test Length 24 HRS	³⁹ Tbg. Pressure -	⁴⁰ Csg. Pressure 185
⁴¹ Choke Size FULL 2"	⁴² Oil N/A	⁴³ Water 0	⁴⁴ Gas 680	⁴⁵ AOF	⁴⁶ Test Method P
⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: 			OIL CONSERVATION DIVISION Approved by: 		
Printed name: William M. Ordemann			Title: DISTRICT SUPERVISOR		
Title: Engineer			Approval Date: <u>3/19/02</u>		
Date: 03/15/02		Phone: (505) 445-6724			

⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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