District I 1625 N. French Dr., Hobbs, NM 88240

District II

Previous Operator Signature

State of New Mexico Energy, Minerals & Natural Resources

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Form C-104

Revised March 25, 1999 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV AMENDED REPORT 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address ² OGRID Number EL PASO ENERGY - RATON, L.L.C. 180514 PO BOX 190 3 Reason for Filing Code RATON, NEW MEXICO 87740 RE ⁴ API Number ⁵ Pool Name Pool Code 30-007-20294 Castle Rock Park - Vermejo Gas 97046 Property Code * Property Name Well Number 25179 VPR 'D' 81 ¹⁰ Surface Location Ul or lot no. Section Township Range Lot.Idn Feet from the Feet from the North/South Line East/West line County 15 482.1 FNL 1651.4 FEL COLFAX 11 Bottom Hole Location UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County B 15 30N 18E 482.1 **FNL** 1651.4 FEL COLFAX 12 Lse Code 13 Producing Method Code 14 Gas Connection Date 15 C-129 Permit Number C-129 Effective Date 17 C-129 Expiration Date 04/18/02 III. Oil and Gas Transporters Transporter Transporter Name ²⁰ POD 21 O/G 22 POD ULSTR Location OGRID and Address and Description 180514 EL PASO ENERGY RATON, L.L.C. G 2831854 P.O. BOX 190 RATON, NEW MEXIO 87740 Produced Water 23 POD 24 POD ULSTR Location and Description Well Completion Data Spud Date Ready Date TD 28 PBTD 29 Perforations 30 DHC, MC 01/17/02 04/04/02 2350 2247 1398' - 2082' 31 Hole Size 32 Casing & Tubing Size 33 Depth Set 4 Sacks Cement 11" 8 5/8" 326 85 sx 7 7/8" 5 1/2" 2259 290 sx VI. Well Test Data 35 Date New Oil Gas Delivery Date Test Date Test Length ³⁹ Tbg. Pressure 40 Csg. Pressure N/A 04/19/02 04/19/02 **24 HRS** 0 11 Choke Size 42 Oil 43 Water 4 Gas 45 AOF 16 Test Method FULL 2" N/A ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied ØIL CONSERVATION DIVISION with and that the information given above is true and complete to the best of my knowledge and belief. Signature: Printed name: Shirley A. Mitchell UPERVISOR Title: Field Adm. Specialist Approval Date: 5/6/02 05/01/02 Phone: (505) 445-6785 ⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator

Printed Name

Title

Date