

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO.

30-007-20302

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

VPR E

8. Well No.

34 WDW

9. Pool name or Wildcat

Stubblefield Canyon - Vermejo Gas

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

1. Type of Well:

Oil Well ☐ Gas Well ☐ Other ☒ Coalbed Methane

2. Name of Operator

EL PASO ENERGY RATON, L.L.C.

3. Address of Operator

PO BOX 190, RATON, NM 87740

4. Well Location

Unit Letter A : 1268.5 feet from the North line and 368.2 feet from the East line

Section 05 Township 31N Range 19E NMPM Colfax County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

8573.6' (GL)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☒

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

4. Drill 6 3/4" hole with air from 6230' - 7370'.

5. Run 5 1/2" casing to 7370', packed off at 6020', and pre-perforated from 7370' - 6230'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE William M. Ordemann TITLE Engineer DATE 02-11-02

Type or print name William M. Ordemann Telephone No. (505) 445-6724

(This space for State use)

APPROVED BY R. E. Johnson TITLE DISTRICT SUPERVISOR DATE 2-18-02

Conditions of approval, if any: