District I

State of New Mexico

Submit to Appropriate District Office

5 Copies

Form C-104 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals & Natural Resources Revised March 25, 1999 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION District III 1220 South St Francis Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 District IV AMENDED REPORT 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address OGRID Number EL PASO ENERGY - RATON, L.L.C. P.O. BOX 190 180514 RATON, NEW MEXICO 87740 3 Reason for Flling Code NW ⁴ API Number Pool Name ⁶ Pool Code 30-007-20349 STUBBLEFIELD CANYON RATON - VERMEJO GAS 96970 Property Code 8 Property Name Well Number 24648 VPR A 92 ¹⁰ Surface Location II. Ul or lot no. Section Township Range Lot.Idn Feet from the North/South Line Feet from the East/West line County 32N 20E 1301.4 North 939.5 COLFAX 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 1301.4 A 20E North 939.5 COLFAX East 12 Lse Code 13 Producing Method Code 14 Gas Connection Date 15 C-129 Permit Number 16 C-129 Effective Date 17 C-129 Expiration Date 08/07/02 III. Oil and Gas Transporters Transporter ²⁰ POD Transporter Name 21 O/G 22 POD ULSTR Location OGRID and Address and Description 180514 EL PASO ENERGY RATON, L.L.C. 2832637 P.O. BOX 190 RATON, NEW MEXICO 87740 Produced Water 24 POD ULSTR Location and Description Well Completion Data 25 Spud Date 26 Ready Date 27 TD 28 PBTD 29 Perforations ³⁰ DHC, MC 03/31/02 1127' - 2032 31 Hole Size 32 Casing & Tubing Size 33 Depth Set Sacks Cement 11" 8 5/8" 328 85 sx. 2224' 7 7/8 5 1/2" 287 sx. VI. Well Test Data Test Length 39 Tbg. Pressure 35 Date New Oil 6 Gas Delivery Date 37 Test Date 10 Csg. Pressure 08/08/02 08/08/02 24 hrs. N/A ^{‡2} Oil 43 Water 44 Gas 45 AOF 46 Test Method 41 Choke Size full 2" N/A ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied CONSERVATION DIVISION with and that the information given above is true and complete to the best of my knowledge and belief Signature Shirley A. Mitchell Printed name: DISTR Field Adm. Specialist Approval Date Title: Phone: (505) 445-6785 Date 08/14/02

Printed Name

Title

Date

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

Previous Operator Signature