District I

1625 N. French Dr., Hobbs, NM 88240

State of New Mexico Energy, Minerals & Natural Resources

Form C-104

Revised March 25, 1999 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION Submit to Appropriate District Office District III 1220 South St Francis 5 Copies 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 OGRID Number EL PASO ENERGY - RATON, L.L.C. P.O. BOX 190 180514 RATON, NEW MEXICO 87740 Reason for Filing Code NW ⁴ API Number 5 Pool Name Pool Code 30-007-20350 STUBBLEFIELD CANYON RATON - VERMEJO GAS 96970 Property Code * Property Name Well Number 24648 VPR A 93 ¹⁰ Surface Location II. Ul or lot no. Section Township Lot.Idn Range Feet from the North/South Line Feet from the East/West line County 32N 20E 1430.5 North 484.2 West COLFAX 11 Bottom Hole Location UL or lot no. Section Township Range Feet from the North/South line Feet from the East/West line County E 35 32N 20E 1430.5 484.2 West 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 08/08/02 III. Oil and Gas Transporters Transporter OGRID 19 Transporter Name 20 POD 21 O/G 22 POD ULSTR Location and Address and Description EL PASO ENERGY RATON, L.L.C. 180514 *2832*638 P.O. BOX 190 RATON, NEW MEXICO 87740 IV. Produced Water 24 POD ULSTR Location and Description Well Completion Data Spud Date Ready Date 27 TD 28 PBTD 29 Perforations ³⁰ DHC, MC 04/02/02 06/20/02 2241' 1087' - 2041' 33 Depth Set 34 Sacks Cement 31 Hole Size 32 Casing & Tubing Size 11" 8 5/8" 322 85 sx. 7 7/8" 5 1/2" 2249 290 sx. VI. Well Test Data 38 Test Length 35 Date New Oil ³⁶ Gas Delivery Date 37 Test Date ⁹ Tbg. Pressure ⁴⁰ Csg. Pressure 08/08/02 24 hrs. 12 08/08/02 N/A 42 Oil 43 Water 44 Gas ¹⁵ AOF 16 Test Method 11 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 Approved by Signature: Title: Printed name: Approval Date: Title: Field Adm. Specialist Phone: (505) 445-6785 Date: 48 If this is a change of operator fill in the OGRID number and name of the previous operator

Printed Name

Previous Operator Signature

Title

Date