

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 South St Francis, Santa Fe, NM 87505

OIL CONSERVATION DIVISION
1220 South St Francis
Santa Fe, NM 87505Submit to Appropriate District Office
5 Copies☐ AMENDED REPORT

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 30-007-20493	⁵ Pool Name Castle Rock Park - Vermejo Gas	⁶ Pool Code 97046
⁷ Property Code 25179	⁸ Property Name VPR 'D'	⁹ Well Number 127

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
O	11	30N	18E		948'	FSL	1444'	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
O	11	30N	18E		948'	FSL	1444'	FEL	COLFAX
¹² Loe Code	¹³ Producing Method Code P	¹⁴ Gas Connection Date 03/30/04	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
180514	EL PASO ENERGY RATON, L.L.C. P.O. BOX 190 RATON, NEW MEXICO 87740	2836655	G	

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date 01/16/04	²⁶ Ready Date 03/26/04	²⁷ TD 1735'	²⁸ PBTD 1726'	²⁹ Perforations 1214' - 1457'	³⁰ DHC, MC
³¹ Hole Size 11"	³² Casing & Tubing Size 8 5/8"	³³ Depth Set 362'	³⁴ Sacks Cement 100 sx		
7 7/8"	5 1/2"	1732'	244 sx		

VI. Well Test Data

³⁵ Date New Oil N/A	³⁶ Gas Delivery Date 03/30/04	³⁷ Test Date 03/30/04	³⁸ Test Length 24 HRS	³⁹ Tbg. Pressure 410	⁴⁰ Csg. Pressure 100
⁴¹ Choke Size FULL 2"	⁴² Oil N/A	⁴³ Water 312	⁴⁴ Gas 2	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: <i>Shirley Mitchell</i>			Approved by: <i>[Signature]</i>		
Printed name: Shirley Mitchell			Title: DISTRICT SUPERVISOR		
Title: Regulatory Analyst			Approval Date: 4/13/04		
Date: 04/07/04			Phone: (505) 445-6785		

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