Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

WELL API NO. **30-007-20546**

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
**VPR A**

1. Type of Well: Oil Well ☐ Gas Well ☐ Other **Coalbed Methane**

8. Well Number **157**

2. Name of Operator
**EL PASO ENERGY RATON, L.L.C.**

9. OGRID Number **180514**

3. Address of Operator
**PO BOX 190, RATON, NM 87740**

10. Pool name or Wildcat
**Stubblefield Canyon – Vermejo Gas**

4. Well Location
Unit Letter **L** : **1357** feet from the **South** line and **1105** feet from the **West** line
Section **15** Township **31N** Range **19E** NMPM **Colfax** County

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
**8337' (GL)**

**Pit or Below-grade Tank Application ☐ or Closure ☐**

**Pit type**_____ **Depth to Groundwater**_____ **Distance from nearest fresh water well**_____ **Distance from nearest surface water**_____

**Pit Liner Thickness:** _____ **mil** **Below-Grade Tank: Volume** _____ **bbls; Construction Material** _____

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

| NOTICE OF INTENTION TO: | | | | SUBSEQUENT REPORT OF: | | | |
|---|---|---|---|---|---|---|---|
| PERFORM REMEDIAL WORK | ☐ | PLUG AND ABANDON | ☐ | REMEDIAL WORK | ☐ | ALTERING CASING | ☐ |
| TEMPORARILY ABANDON | ☐ | CHANGE PLANS | ☐ | COMMENCE DRILLING OPNS. | ☒ | P AND A | ☐ |
| PULL OR ALTER CASING | ☐ | MULTIPLE COMPL | ☐ | CASING/CEMENT JOB | ☐ | | |
| OTHER: | ☐ | | | OTHER: | ☐ | | |

13. 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.

09/10/04 Spud in @ 5:30 a.m. Drill 11" surface hole to 355'. Ran 8 jts of 8 5/8", J-55, 40 #, ST&C casing to 347'. Halliburton mixed and pumped 100 sks Midcon II PP, 14 ppg, yield 1.66 at 3 bpm with 110 psi with 6% salt, .3% gilsonite, .3% versaset, and 25# flocele per sack. Circulated 7 bbls of cement to surface. WOC 8 hrs. Test surface casing to 500 psi for 30 min.

09/11/04 Drill 7 7/8" hole f/ 355' - 2180'. Reached TD at 2180'. MIRU Schlumberger & log well. Logger TD at 2655'. Ran 69 jts of 5 ½", 17#, J-55 LT &C casing to 2623'. Halliburton mixed and pump 61 bbls gel pre flush at 4 bpm at 25 psi, 522 sks Midcon II, 13.0 ppg, yield 2.04, .3% versaset , 5#/sx gilsonite, 2#/sk granulite, 6% salt and .1% Super CBL. Plug bumped w/ 1000 psi. Circulated 22 bbls of cement to surface. Well shut in.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. **I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.**

SIGNATURE Shirley Mitchell TITLE **Regulatory Analyst** DATE **09/17/04**

Type or print name Shirley A Mitchell E-mail address: Shirley.mitchell@elpaso.com Telephone No. (505) 445-6785

**For State Use Only**

APPROVED BY: _____ TITLE DISTRICT SUPERVISOR DATE 9/23/04

Conditions of Approval (if any):