

..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

Form C-103
May 27, 2004

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

WELL API NO. 30-007-20701
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name VPR B
8. Well Number 206
9. OGRID Number 180514
10. Pool name or Wildcat Van Bremmer - 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 E & P COMPANY, L.P.

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

4. Well Location
Unit Letter **N** : **1230** feet from the **South** line and **1775** feet from the **West** line
Section **33** Township **30N** Range **18E** **NMPM** **Colfax** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
8,189' (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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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.

05/20/06 Patterson ran CBL 2,286' to surface. Estimated top of cement at surface.
05/23/06 Patterson perf'd 1st stage - 989'- 991', 1034'- 1036', 1053'- 1056', 1059'- 1061', 1207'- 1209' 44 Holes
HES frac'd 1st stage - Pumped 447,557 scf 70% quality nitrogen with linear gel foam with 63,500 lbs 16/30 sand.
Patterson perf'd 2nd stage - 734'- 736', 740'- 743', 751'- 754', 831'- 833', 885'- 888', 912'- 914' 60 Holes
HES frac'd 2nd stage - Pumped 604,570 scf 70% quality nitrogen with linear gel foam with 84,468 lbs 16/30 sand.
05/31/06 Clean out well bore. RIH tubing, rods and pump. Well is ready to be tested and put on production.

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 08/31/2006
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: Ed Martin TITLE DISTRICT SUPERVISOR DATE 9-13-06
Conditions of Approval (if any):