

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 South St Francis, Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

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

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.)		WELL API NO. <b>30-007-20435</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other COALBED METHANE		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>EL PASO ENERGY RATON, L.L.C.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. BOX 190 RATON, NM 87740</b>		7. Lease Name or Unit Agreement Name: <b>VPR D</b>
4. Well Location Unit Letter <b>A</b> : <b>1307</b> feet from the <b>North</b> line and <b>1060</b> feet from the <b>East</b> line Section <b>17</b> Township <b>30N</b> Range <b>17E</b> NMPM COLFAX County		8. Well No. <b>120</b>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>9,585' (GR)</b>		9. Pool name or Wildcat

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: L PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> COMPLETION

12. 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 recompilation.

08/08/03 HES ran Cement Bond Log. TOC at 28'.  
08/11/03 HES perf'd 1<sup>st</sup> stage: 3022'-3026' 11 Holes  
HES frac'd 1<sup>st</sup> stage: Pumped fracture treatment with 7,040 lbs of 20/40 Ottawa/TLC sand at 21.2 bpm, 2245 psi, Final ISIP 2134 psi.  
HES perf'd 2<sup>nd</sup> stage: 2978'-2981' 8 Holes  
HES frac'd 2<sup>nd</sup> stage: Pumped fracture treatment with 3,040 lbs of 20/40 Ottawa/TLC sand at 12.2 bpm, 2552 psi, Final ISIP 3852 psi.  
HES perf'd 3<sup>rd</sup> stage: 2813'-2817' 11 Holes  
HES frac'd 3<sup>rd</sup> stage: Pumped fracture treatment with 65,930 lbs of 20/40 Ottawa/TLC sand at 17.8 bpm, 2796 psi, Final ISIP 2428 psi.  
08/15/03 Installed rods, tubing, 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.

SIGNATURE Shirley A. Mitchell TITLE Senior Specialist DATE 09/15/03  
Type or print name: Shirley A. Mitchell Telephone No.: (505) 445-6785

(This space for State use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 9/18/03  
Conditions of approval, if any: