Revised March 25, 1999

Form C-104 District I State of New Mexico 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals & Natural Resources District II Submit to Appropriate District Office 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION District III 5 Copies 1220 South St Francis Santa Fe. NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 AMENDED REPORT District IV 1220 South St Francis, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address OGRID Number EL PASO E & P COMPANY, L.P. 180514 Reason for Filing Code PO BOX 190 RATON, NEW MEXICO 87740 NW ⁴ API Number ⁵ Pool Name Pool Code 97047 Van Bremmer – Vermejo Gas 30-007-20743 Well Number **Property Code Property Name** 25180 148 VPR B ¹⁰ Surface Location Π. Ul or lot no. Section Township Range Lot.ldn Feet from the North/South Line Feet from the East/West line County E 23 29N 18E 1992 FNL 1275 **FWL** COLFAX **Bottom Hole Location** UL or lot no. Section Township Lot Idn Feet from the North/South line Feet from the East/West line County COLFAX E 29N 18E 1992 FNL 1275 **FWL** 12 Lse Code **Producing Method Code** 4 Gas Connection Date ⁵ C-129 Permit Number C-129 Effective Date C-129 Expiration Date 06/19/2007 III. Oil and Gas Transporters ** Transporter OGRID 20 POD " O/G 22 POD ULSTR Location Transporter Name and Address and Description 180514 EL PASO E & P COMPANY, L.P. G P.O. BOX 190 RATON, NEW MEXIO 87740 IV. Produced Water 24 POD ULSTR Location and Description Well Completion Data Spud Date * Ready Date "TD 28 PBTD "Perforations [™] DHC, MC 02/22/2007 05/23/2007 1195'- 2413' 2,725 2,591 31 Hole Size 32 Casing & Tubing Size 3 Depth Set Sacks Cement 11" 100 sks 8 5/8" 337' 289 sks 7 7/8" 5 1/2" 2,610 VI. Well Test Data Tbg. Pressure " Csg. Pressure Bate New Oil * Gas Delivery Date Test Date Test Length N/A 06/19/2007 06/19/2007 **24 HRS** 0 psi 15 psi " Test Method " Choke Size 42 Oil Water " Gas " AOF N/A 11 ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with OIL CONSERVATION DIVISION belief. Approved by: Signature: Printed name: Title:

Shirley A. Mitchell

Title: Regulatory Analyst

Approval Date:

16/07

Phone: (505) 445-6785 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