| Submit 3 Copies To Appropriate District Office  | State of nev  |                            |                        | 10m C 105                         |
|---|---|----------------------------|------------------------|-----------------------------------|
| District I  | Energy Maner is and                                     | Natural Resources          | WELL ADDING            | Revised March 25, 1999            |
| 1625 N. French Dr., Hobbs, NM 87240<br>District II  | KEUI  |                            | WELL API NO.           | 30-007-20438                      |
| 811 South First, Artesia, NM 87210  | OIL CONSERVAT   |                            | 5. Indicate Type       |                                   |
| District III 1220 South St Frances 1000 Rio Brazos Rd., Aztec, NM 87410   |   | STATE C                    |                        |                                   |
| District IV   | strict IV Santa Pe, NW 8/303                            |                            | 6. State Oil & C       |                                   |
| 1220 South St Francis, Santa Fe, NM  87505  Oil Conservation Division  1220 S. Saint Francis Drive  |   |                            |                        |                                   |
| SUNDRY NOTIC  | CES AND REPORTS ON THE                                  | ot Francis Drive           | 7. Lease Name or       | r Unit Agreement Name:            |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PEUG BACK TO A   |   |                            | ļ                      |                                   |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)   |   |                            |                        | VPR A                             |
| 1. Type of Well:  |   |                            |                        |                                   |
| Oil Well Gas Well   | Other X Coalbed M                                       | <u> Iethane</u>            |                        |                                   |
| 2. Name of Operator   |   |                            | 8. Well No.            | 128                               |
| EL PASO ENERGY RATON, L.L.C.  3. Address of Operator  |   |                            | 9. Pool name or V      | Wildcat                           |
|   | 90, Raton, NM 87740                                     |                            | 7. Tool hame of        | W Hacat                           |
| 4. Well Location  |   |                            |                        |                                   |
| 1   |   |                            |                        |                                   |
| Unit Letter <u>M</u> :  | 1233 feet from the Sou                                  | uth line and 557           | feet from the <b>W</b> | <u>/est</u> line                  |
| Section 23 Township 32N Range 19E NMPM Colfax County  |   |                            |                        |                                   |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.)  |   |                            |                        |                                   |
| urina artista an an 47. Parasa and a salar artista  |   | 20' (GL)                   |                        | ar transcourse, labore respective |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |                            |                        |                                   |
| NOTICE OF INT   |   |                            | SEQUENT RE             |                                   |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON  | REMEDIAL WOR               | RK 🗀                   | ALTERING CASING 🗀                 |
| TEMPORARILY ABANDON   | -CHANGE PLANS - E_                                      | COMMENCE DE                | ILLING OPNS.           | DLUC AND -                        |
| EMPORARIET ABANDON  | CHANGE FLANS  | ] COMMENCE DR              | ILLING OFNS.           | ABANDONMENT                       |
| PULL OR ALTER CASING 🔻  | MULTIPLE  | CASING TEST A              | ND 🗆                   |                                   |
|   | COMPLETION  | CEMENT JOB                 |                        |                                   |
| OTHER:  |   | OTHER:                     |                        |                                   |
| 12. Describe proposed or complete   | d operations. (Clearly state a                          | 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.   |   |                            |                        |                                   |
| 02/12/04 Smillin @ 0:00 - m Duil  | II. 112 auréaga bala ta 2702 - 1                        | Dan 0 :+= =£ 0 5/00 1 5    | 5 24 mmf CTP-C         | iling 4 - 2622                    |
| 02/13/04 Spud in @ 9:00 a.m. Drill 11" surface hole to 370'. Ran 8 jts of 8 5/8", J-55, 24 ppf ST&C casing to 363'. 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  |   |                            |                        |                                   |
| 02/14/04 Drill 7 7/8" hole f/ 370' - 2725'. Reached TD at 2725'. MIRU Schlumberger & log well. Logger TD at 2718'.  |   |                            |                        |                                   |
|   | J-55 LT &C casing to 2698'                              |                            |                        | <b>T</b>                          |
|   | bpm at 30 psi, 460 sks M<br>nd .1% Super CBL. Circulate |                            |                        |                                   |
| 2#/SK granume, 070 San an   | id .176 Super CDL. Circulat                             | ed 32 ools of content to   | surface. Well slitt i  | 11.                               |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |   |                            |                        |                                   |
| · · ·   |   |                            |                        |                                   |
| SIGNATURE Shirley Butchell TITLE Senior Specialist DATE 02/20/04  |   |                            |                        |                                   |
| Type or print name Shirley A. Mitchell Telephone No. (503) 445-6785   |   |                            |                        |                                   |
| (This space for State use)  |   |                            |                        |                                   |
| APPPROVED BY K Down TITLE DISTRICT SUPERVISOR DATE 2/25/04  |   |                            |                        |                                   |
| Conditions of approval, if any:   |   |                            |                        |                                   |
|   |   |                            |                        |                                   |