District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised March 25, 1999		
District I G25 N, French Dr., Hobbs, NM 87240	Energy, Minerals and Natural Resources		WELL API NO.		
<u>District II</u> 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION		30-007-20291		
District III	1220 South St Fra	ancis	5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.		
1220 South St Francis, Santa Fe, NM 87505			o. state on a	Sub Double 140.	
SUNDRY NOT	ICES AND REPORTS ON WELLS		7. Lease Name	or Unit Agreement Name:	
	SALS TO DRILL OR TO DEEPEN OR PLU CATION FOR PERMIT" (FORM C-101) FO		VPI	R D	
1. Type of Well:					
Oil Well Gas Well 2. Name of Operator	Other Coalbed Methane		8. Well No.	54	
· -	ENERGY RATON, L.L.C.		8. Well No.	34	
3. Address of Operator			9. Pool name or	Wildcat	
P.O. Box 190, Raton, NM 87740 4. Well Location					
4. Well Location					
Unit <u>D</u> : 121	6 feet from the North line	and <u>1260</u>	feet from the _	Westline	
Section 3 Township 30N Range 18E NMPM Colfax County					
A CONTRACTOR OF THE STATE OF TH	10. Elevation (Show whether DI 8509'		c.)		
11 Check A			Report or Other	· Data	
11. Check Appropriate Box to Indicate Nature of Notice, NOTICE OF INTENTION TO:			SEQUENT RE		
		REMEDIAL WOR		ALTERING CASING □	
TEMPORARILY ABANDON			ILLING OPNS. 🔲	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN	ND 🗆	ABANDONNENT	
OTHER:		OTHER:	ReFrac Cor	mpleted	
	oleted operations. (Clearly state all				
date of starting any proposed v completion or recompletion.	vork). SEE RULE 1103. For Multi	ple Completions: A	Attach wellbore dia	gram of proposed	
02/06/04 Re-perforate upper Vermejo interval 1,056'- 1,062' 4 spf 24 Holes (6' Coal).					
Re-stimulate with 268 mcf 70Q N2 Foam and 52,800 lbs 20/40 Ottawa sand, ISIP 647 psi. 02/10/04 Run production equipment. Ready to be placed back on production.					
	destance of the state of the st				
I hereby certify that the information	n above is true and complete to the b	pest of my knowled	ge and belief.		
SIGNATURE Surley	nitchell TITLE	Senior Specialist	DATE <u>02/</u>	16/04	
Type or print name Shirley A.	Mitchell Telephon	ne No. (505) 445-6	5785		
(This space for State use)				/ /	
APPPROVED BY	Mother TITLED	ISTRICT SU	PERVISOR	DATE 2/25/04	
Conditions of approval, if any:	//				
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