

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
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
 OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-103
 Revised March 25, 1999

WELL API NO. **30-007-20150**

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:
VPR D

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 ENERGY RATON, L.L.C.

8. Well No. **22**

3. Address of Operator
P.O. BOX 190; RATON, NM 87740

9. Pool name or Wildcat

4. Well Location
 Unit Letter F; 1739' feet from the North line and 2392' feet from the West line
 Section 31 Township 31N Range 18E NMPM COLFAX County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
8707' (GR)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPLETION
 OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
 CASING TEST AND CEMENT JOB
 OTHER: **COMPLETION**

12.
 4/17/00 Ran CBL (Patterson). TOC surface.
 7/12/00 Perforate: 1901'-1906', 1885'-1889', 1865'-1869', 1840'-1844'. All 4spf.
 7/18/00 Stimulate: 140000# 20/40 Sand with 20# Delta 140 / Sandwedge.
 Perforate: 1810'- 1814', 1786'- 1790'. All 4 spf. Stimulate with 1000 gals 15% HCl.
 Perforate: 1632'- 1639' (4 spf).
 Stimulate: 105000# 20/40 Sand with 20# Delta 140 / Sandwedge.
 7/20-21/00 Clean out to 1966'. Ran After frac Log (Patterson). Ran tubing & rods. Well ready for production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Joel L. Pettit TITLE WELL SITE SUPERVISOR DATE 08/21/00

Type or print name: JOEL L. PETTIT Telephone No.: (505) 445-4620

(This space for State use)

APPROVED BY [Signature] TITLE **DISTRICT SUPERVISOR** DATE 8/25/00

Conditions of approval, if any: