

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

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. 30-007-20174
1. Type of Well: Oil Well ☐ Gas Well ☒ Other COALBED METHANE		5. Indicate Type of Lease STATE ☐ FEE ☒
2. Name of Operator EL PASO ENERGY RATON, L.L.C.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 190; RATON, NM 87740		7. Lease Name or Unit Agreement Name: VPR D
4. Well Location Unit Letter <u>C</u> ; <u>1306'</u> feet from the <u>North</u> line and <u>1524'</u> feet from the <u>West</u> line Section <u>7</u> Township <u>30N</u> Range <u>18E</u> NMPM COFAX County		8. Well No. 4
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 8387' (GR)		9. Pool name or Wildcat
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.		

4/18/00 Ran CBL (Patterson). TOC surface.

6/26-27/00 Perforate: 1976'-1981', 1924'-1928', 1900'-1904', 1861'-1865'. (All 4 spf)
Stimulate: 20000# 20/40 & 40000# 12/20 Sand. 396300 scf N2 70 Quality foam.
Perforate: 1716'-1720', 1693'-1703'. All 4 spf.
Stimulate: 20000# 20/40 & 26000# 12/20 Sand. 325000 scf N2 70 Quality foam.

7/05-09/00 Clean out to 1990'. Ran After frac Log (Patterson). Ran tubing & rods. Well ready to be electrified.

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 8/16/00

Type or print name: JOEL L. PETTIT

Telephone No. (505) 445 - 4620

(This space for State use)

APPROVED BY Ry E Johnson TITLE **DISTRICT SUPERVISOR** DATE 8/25/00

Conditions of approval, if any: