1625 N. French Dr., Hobbs, NM 8824			State of New Mexico Energy, Minerals & Natural Resources						Form C-104 Revised March 25, 1999				
District II 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 8741			OIL CONSERVA 1220 South				ncis	ON	Submit to Appropriate District Office 5 Copies				
District IV		unta Fe, NM 87410	Juliu 10, 1111 07505						AMENDED REPORT				
I.		EQUEST I	FOR AL		LE ANI	D AU	THORI	ZATI	ON TO TR			·	
^v Operator name and Address EL PASO ENERGY - RATON, L.L.C. P.O. BOX 190											² OGRID Number 180514		
		RAT	ON, NEW MEXICO 87740										
										³ Reason for Filing Code NW			
⁴ API Number 30-007-20453			⁵ Pool Name STUBBLEFIELD CANYON RATON - VERMEJO GA						AS	⁶ Pool Cade 96970			
⁷ Property Code 24648			^a Property Name						⁹ Well Number VPR A 150				
II. ¹⁰		Location									¥.		
Ul or lot no.	Section	Township	, , , , , , , , , , , , , , , , , , ,	Lot.Idn	Feet from t		North/Sou			East/	West line	County	
M 11 1	25 Bottom I	25 32N 19E 1575 S ttom Hole Location		So	ith	1066 West COLFAX							
UL or lot no.	Section	Township	Range	Lot Idn	Feet from		North/So	1		East/West line		County	
M ¹² Lse Code	25 ¹³ Produci	32N ng Method Code	19E ¹⁴ Gas C	Connection Date	157 15 C-	75 129 Permi	Sou Sout Number		1066 ¹⁶ C-129 Effective		West " C-	COLFAX 129 Expiration Date	
		P		06/14/04									
		Transporter				10		10.5		11			
OGRID			⁹ Transporter Name and Address			²⁰ POD ²¹ O/G			²³ POD ULSTR Location and Description				
180514		EL PASO ENERGY RATON, L.L.C. P.O. BOX 190					836707					e	
	RATON, N	ATON, NEW MEXICO 87740									-		
<u> </u>													
							-						
				<u> </u>									
	-FALLER C							No.Coline Veneza e a					
IV. Produ	uced Wa	ter							I				
23	POD				1 	" POD UL	STR Locat	ion and D	escription				
V. Well (ady Date 27 TD			28 PBTD			²⁹ Perfora	tions		³⁰ DHC, MC	
02/2		1	06/06/04		2665'		2610'		835'- 2		Dire		
³¹ Hole Size			³² Casing & Tubing Size			³³ Depth Set 363'			<u>b</u>	³⁴ Sacks Cement 100 sks			
	7 7/8"		8 5/8" 5 ½"			2637'						8 sks	
VI. Well	Test Da	 ta										~ <u>~</u>	
³⁵ Date N				³⁸ Test Length 24 hrs.		³⁹ Tbg. Pressu			⁴⁰ Csg. Pressure 0				
⁴¹ Choke Size full 2"		42 Oil		43 W	⁴³ Water		⁴⁴ Gas		45 AOF			44 Test Method	
full 2" N/A 4" I hereby certify that the rules of the Oil Cons						OH: CONSERVAT			TON				
with and that the knowledge and t Signature:	belief.	given above is true				Approved					21110		
Signature: Shirley Mitchell Printed name: Shirley A. Mitchell							Title: DISTRICT/SUPERVISOR						
Title: Regulatory Analyst							Approval Date: 0/16/24						
Date: 07/28/04 Phone: (505) 445-6785							D,	101	~ /				
⁴⁸ If this is a ch	ange of opera	tor fill in the OG	RID number	and name of th	e previous o	perator							
	Previous O	perator Signatur	e			Printe	d Name				Title	Date	
└─────													