

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

FEB 07 2005

WELL API NO. <b>30-007-20550</b>
7. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
7. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <b>VPR CH</b>
8. Well Number <b>40</b>
9. OGRID Number
10. Pool name or Wildcat

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <b>STRAT TEST</b>
2. Name of Operator <b>EL PASO ENERGY RATON, L.L.C.</b>
3. Address of Operator <b>P.O. BOX 190, RATON, NM 87740</b>

4. Well Location Unit Letter <b>A</b> : <b>95</b> feet from the <b>North</b> line and <b>315</b> feet from the <b>East</b> line Section <b>2</b> Township <b>30N</b> Range <b>20E</b> NMPM <b>Colfax</b> County	11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>7,435' (GL)</b>
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Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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13. Describe proposed or completed operations. (Clearly state 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 recompletion.

12-09-04 Mack Drilling spudded the core hole. Drilled a 6 1/2" hole to 330'. Ran 4 1/2" surface casing to 228'. Mixed and pumped 32 sks class G cement to surface.  
01-03-05 MIRU Boart Longyear Core Rig. Drilled cement out to 330'.  
To  
01-20-05 Continuous core to TD at 1,505'.  
Schlumberger ran Induction and Neutron Density Logs.  
01-21-05 TIH with DP to bottom 1,505". Mix and spot 300' cement plug from 1,505' to 1,200'. Pull 500' DP.  
01-22-05 Finished plugging out well 1,200' to surface, ground level. Total cement pumped was 94 sks class G cement. Clean location., close pit, and restore location to original condition.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Shirley A Mitchell TITLE Regulatory Analyst DATE 02-02-05

Type or print name Shirley A Mitchell E-mail address: shirley.mitchell@elpaso.com Telephone No. (505) 445-6785  
For State Use Only

APPROVED BY: [Signature] TITLE DISTRICT SUPERVISOR DATE 2/8/05  
Conditions of Approval (if any):