

FORM 5A Rev 02/08	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
COMPLETED INTERVAL REPORT			Document Number: 2071843				
The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.							

1. OGCC Operator Number: <u>100872</u>	4. Contact Name: <u>MARIA GOMEZ</u>
2. Name of Operator: <u>EL PASO E & P COMPANY LP</u>	Phone: <u>(713) 4205038</u>
3. Address: <u>1001 LOUISIANA ST</u>	Fax: <u>(713) 4458554</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77002</u>	

5. API Number <u>05-071-07796-00</u>	6. County: <u>LAS ANIMAS</u>
7. Well Name: <u>VPR C</u>	Well Number: <u>117</u>
8. Location: QtrQtr: <u>NENW</u> Section: <u>18</u> Township: <u>35S</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>PURGATOIRE RIVER</u> Field Code: <u>70830</u>	

<u>Completed Interval</u>	
FORMATION: <u>RATON-VERMEJO COALS</u>	Status: <u>PRODUCING</u>
Treatment Date: <u>09/17/2010</u>	Date of First Production this formation: _____
Perforations Top: <u>1252</u> Bottom: <u>1307</u>	No. Holes: <u>30</u> Hole size: <u>45/100</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
PERF'D 1252-1255 & 1304-1307, 1513-1519, 1526-1529, 1582-1588', 1590'-1592' & 1610'-1616' 09/16/10 1610'-1616' 300 GAL OF ACID 7.5% HCL, 1582'-1588' & 1590-1592 300 GAL ACID 7.5% HCL 1526-1529 300 GALL OF ACID 7.5% HCL 1513-1519 300 GAL OF ACID 7.5% HCL 9/17/10 1526-1529 50 GAL OF ACID 15% HCL 1252-1255 150 AK IF ACUD 7.5% HCL	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:	
Date: <u>10/23/2010</u> Hours: <u>24</u> Bbls oil: <u>0</u> Mcf Gas: <u>28</u> Bbls H2O: <u>70</u>	
Calculated 24 hour rate:	Bbls oil: <u>0</u> Mcf Gas: <u>28</u> Bbls H2O: <u>70</u> GOR: <u>0</u>
Test Method: <u>production</u>	Casing PSI: <u>14</u> Tubing PSI: <u>300</u> Choke Size: _____
Gas Disposition: <u>SOLD</u>	Gas Type: <u>COAL GAS</u> BTU Gas: <u>998</u> API Gravity Oil: <u>0</u>
Tubing Size: <u>2 + 7/8</u> Tubing Setting Depth: <u>1684</u> Tbg setting date: <u>09/19/2010</u> Packer Depth: _____	
Reason for Non-Production: _____	
Date formation Abandoned: _____ Squeeze: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of sacks cmt _____	
Bridge Plug Depth: _____ Sacks cement on top: _____	

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORMATION: RATON COAL Status: COMMINGLED

Treatment Date: 09/17/2010 Date of First Production this formation: _____

Perforations Top: 1252 Bottom: 1307 No. Holes: 30 Hole size: 45/100

Provide a brief summary of the formation treatment: _____ Open Hole:

PERF'D 1252-1255 & 1304-1307- 9/16/10 1303'-1307' 200 GAL ACID 7.5% GCK
9/17/10 1252'-1255' 150 GAK IF ACUD 7.5% HCL
*6 PREVIOUS HOLES PLUS 24 HOLES THIS PERF = 30 HOLES.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: VERMEJO COAL Status: COMMINGLED

Treatment Date: 09/17/2010 Date of First Production this formation: _____

Perforations Top: 1513 Bottom: 1616 No. Holes: 107 Hole size: _____

Provide a brief summary of the formation treatment: _____ Open Hole:

PERF'D 1513-1519', 1526-1529,1582-1588', 1590-1592' & 1610'-1616'
9/16/10 1610'-1616' 300 GAL OF ACID 7.5% HCL, 1582'-1588' & 1590'-1592' 300 GAL 7.5% HCL 1526-1529 300 GAL OF ACID 7.5% HCL.
1513-1519 300 GAL OF ACID 7.5% HCL, 9/17/10 1526-1529 50 GAL OF ACID 15% HCL, * 15 PREVIOUS HOLES PLUS 92 HOLES THIS PERF = 107 HOLES.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: MARIA GOMEZ

Title: SR. REGULATORY ANALYST Date: 10/12/2010 Email MARIA.GOMEZ@ELPASO.COM
:

Attachment Check List

Att Doc Num	Name
2071843	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	req test data	3/22/2011 1:07:10 PM

Total: 1 comment(s)