

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: <div style="text-align: center; font-weight: bold;">2511485</div>				

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>05-071-07310-00</u>	6. County: <u>LAS ANIMAS</u>
7. Well Name: <u>VPR C</u>	Well Number: <u>60</u>
8. Location: QtrQtr: <u>SWNE</u> Section: <u>34</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
9. Field Name: <u>PURGATOIRE RIVER</u> Field Code: <u>70830</u>	

Completed Interval

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>1204</u> Bottom: <u>2036</u>	No. Holes: <u>136</u> Hole size: <u>45/100</u>
Provide a brief summary of the formation treatment:	Open Hole: <input type="checkbox"/>
<u>REPERF'D @ 2031-2036, 2009-2012, & 1995-2000.</u>	
This formation is commingled with another formation: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Information:	
Date: <u>09/17/2010</u> Hours: <u>24</u>	Bbls oil: <u>0</u> Mcf Gas: <u>68</u> Bbls H2O: <u>42</u>
Calculated 24 hour rate:	Bbls oil: <u>0</u> Mcf Gas: <u>68</u> Bbls H2O: <u>42</u> GOR: <u>0</u>
Test Method: <u>PRODUCTION</u>	Casing PSI: <u>8</u> Tubing PSI: <u>95</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>2095</u>	Tbg setting date: <u>07/29/2010</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: _____	

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: 8/4/2010 Email: MARIA.GOMEZ@ELPASO.COM

Attachment Check List

Att Doc Num	Name
2511485	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 1:04:59 PM

Total: 1 comment(s)