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U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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. OIL WELL GAS WELL OTHER: CO2

2. Name of Operator: AMOCO PRODUCTION COMPANY

3. Address of Operator: P.O. BOX 68, HOBBS, NEW MEXICO 88240

4. Location of Well: UNIT LETTER G 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE, SECTION 22 TOWNSHIP 18N RANGE 35E NMPM.

7. Unit or Agreement Name: Bravo Dome Carbon Dioxide Gas Unit

8. Farm or Lease Name: Bravo Dome Carbon Dioxide Gas Unit

9. Well No.: 1835 221G

10. Elevation (Show whether DF, RT, GR, etc.): 4584' GL

11. County: Union

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING

TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT

PULL OR ALTER CASING OTHER CASING TEST AND CEMENT JOB

OTHER _____

SUBSEQUENT REPORT OF:

17. 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.

MISU 7-18-85 and killed well with 15 BW 270 KCL. Released packer and POH. Perforated 2440-56' with 2 SPF. Re-ran production equipment. Tubing landed at 2221' and packer set 2190'. Pressure tested packer 1000 psi - ok. Swabbed 46LW and well flowed 20psi. Stimulated with 22 tons CO2 and 250 Ball Sealers. Opened well to tank and flow for 1 hr. Installed production valve and MISU 7-19-85. Returned well to production. Work completed 8/26/85.

PAWD: 1064 MCFD.

O+2-NMOCD,SF 1-J.R. Barnett HOU. Rm.21.156 1-F.J. Nash HOU. Rm.4.206 1-WF,Clayton 1-Susp 1-CMH 1-Amerada Hess 1-Amerigas 1-Cities Service 1-Conoco 1-CO2 in Action 1-Sun 1-Excelsior 1-Tex 1-Exxon 1-WF,Hobbs

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED: Charles M. Ferris TITLE: Admin. Analyst (SG) DATE: 8/28/85

APPROVED BY: [Signature] TITLE: DISTRICT SUPERVISOR DATE: 9-9-85

CONDITIONS OF APPROVAL, IF ANY: