STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED
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OIL CONSERVATION DIVISION
SANTA FE

Form C-103
Revised 10-1-7

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 ☒ CO2 OTHER-

7. Unit Agreement Name
BDCDGU

2. Name of Operator
AMOCO PRODUCTION COMPANY

8. Farm or Lease Name
BDCDGU 2033

3. Address of Operator
P. O. Box 68 Hobbs, New Mexico 88240

9. Well No.
101

4. Location of Well
UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 10 TOWNSHIP 20-N RANGE 33-E NMPM.

10. Field and Pool, or Wildcat
Und. Tubb

15. Elevation (Show whether DF, RT, GR, etc.)
5020' GL

12. County
Harding

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER ☐	

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.

Propose to repair tubing/packer leak as follows:

Kill well with 2% KCL water. Pull tubing and packer. Run in hole with tubing and packer using thread lubricant on box to seal connections. Pump annular volume of 2% KCL inhibited water down backside and set the packer. Finish loading backside to surface. Pressure test backside. Swab to kick well off. Flow 2 hours to recover load water. Shut-in the well.

O+2-NMOCD,SF 1-HOU 1-SUSP 1-CLF 1-Amerada 1-Amerigas 1-Cities Serv. 1-Conoco
1-CO2 in Action 1-Excelsior 1-Sun. Tex.

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

SIGNED Cathy L. Forman TITLE Assist. Admin. Analyst DATE 12-15-82

APPROVED BY [illegible] TITLE [illegible] DATE 12/20/82

CONDITIONS OF APPROVAL, IF ANY: