OIL CONSERVATION DIVISION P.O. Box 2008 STETECT I P.O. Conserve FD. America Not NEXUS STETECT I STETECT I P.O. Conserve FD. America Not NEXUS STETECT I STET	Submit 3 Copies		State of New Mex			Form C-10	
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OD NOT USE THIS SOUND FOR PROPOSALS TO CHILL, OR TO DESPETAND FRUID BACK TO A DEFERENT RESPONDED, USE APPENDING FOR PROPOSALS) IT TYPE OF Well OR. OR WILL OTHER CO2 S. WHILE OF OLD FOR SUCH PROPOSALS) S. WHILE NO. OXYUSA Inc. 1930-281G 9. Poul name or Wildcut BRAVO DOME CO2 GAS UNIT 1930-281G 9. Poul name or Wildcut BRAVO DOME CO2 GAS UNIT NOTICE OF INTENTION TO: SECTION OXYUSA Inc. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SERPORAM REMEDIAL WORK PLUG AND ABANDON OTHER OTHER OTHER OTHER OTHER OTHER FORMS TEST AND CEMENTS OTHER TO STREET ST	<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM		2: 52		6. State Oi	l & Gas Lease No.	
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Type of Well will not be a compared to the period of the compared to the c	DI				7. Lease Na	ame or Unit Agreem	ent Name
2. Name of Operator A. Address of Operator P.O. Box 393, AMISTAD, NEW MEXICO B8410 3. Name of Operator P.O. Box 393, AMISTAD, NEW MEXICO B8410 3. New Laceston Out Letter G. 1700 Feet From The North Line and 1700 Feet From The East Line Section 28 Township 10 N. Runge 36 NMMM HARDING County 10. Elevation (Show-whether-DF ARS NT. Gr. etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEMPORARILY ABANDON CHANGE PLANS CASING TEST AND CEMENT 108 TOTHER Youth Brandword datas, including essented date of starting any proposed work) YEAR MONTH/DAY TEG. PRES. CSG. PRESS. BLEED DOWN TIME 2011 9/14 545# 2011 9/14 545# 2012 9/10 555# 2013 8/28 550# 2014 8/20 570# This approval for temporarily abandonment expires (County Start and Starting and Starting County Start and Starting Count	1. Type of Well	(, 0,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,		<u> </u>	BRAVO	DOME CO2 GAS UN	JIT.
OXY USA Inc. 1930-281G 9. Pool name or Wildcat P.O. Box 303, AMISTAD, NEW MEXICO 88410 4. Well Lection Use Letter G : 1700	OIL		OTHER C	002			
A Miles of Operator P.O. Box 303, AMISTAD, NEW MEXICO 88410 1. Well Location Voil Loc	2. Name of Operator				8. Well No.	•	
A. Well Leasune Unit Lear G 1700 Free From The North Unit Learned 1700 Feet From The Bas Line Section 28 Township 19N Range 30E NMPM HARDING County 10. Elevation (Show whether DF, RKR, RT, GR, etc.) 11. 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 GOMENOE DRILLING OPNS PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHER PULL OR ALTER CASING OTHER Yearly Braderhead Yest (TA, Well) 12. Describe Proposed or Completed Operations SEE RULE 1103. YEAR MONTH/DAY TBG. PRESS. CSG. PRESS. BLEED DOWN TIME 2011 9/14 545# 2012 9/10 555# 2011 9/14 545# 2012 9/10 555# 2013 8/28 550# 2014 8/20 570# This approval for temporally abandonment expires CSG. PRESS. BLEED DOWN TIME This approval of Completed Operations SIGNATURE TITLE Well Analyst TILE PROPERTOR OATE OATE SESSION CASE OF SESSION CASE (SGS 234-3558) THE DISTRICT SUPERVISOR CASE (SGS 234-3558)	OXY USA Inc.					1930-281G	
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Section 28 Towaship 19N Range 30E NMPM HARDING County 10. Elevation (Storm whether DF, RRR, RT, GR, ec.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING OTHER: Yearly Baddehead Test (TA Wei) 12. Describe Proposed or Completed Operations SEE RIULE 1108. Chearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) YEAR MONTH/DAY TBG, PRESS. CSG, PRESS. BLEED DOWN TIME 2011 4/5 555# 2012 9/10 555# 2013 8/28 550# 2014 8/20 570# This approval for temporary abandonment expires. Properties of the least of my knowledge and belief. This approval of Completed Operations of the least of my knowledge and belief. This approval of Completed Operations of the least of my knowledge and belief.	4. Well Location	· 1700 East From T	he North	l ina and	1700	et From The Fact	Line
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Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE	PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER: 12. Describe Proposed or Comple SEE RULE 1103. YEAR MONTH 2011 4/5 2011 9/1 2012 9/1 2013 8/2	TECE OF INTENTION TO: CHANGE PLANS TECH Operations CHANGE PLANS (Clearly state) H/DAY TBG. PRESS. 555# 4545# 0555# 28550#	N	REMEDIAL WORK COMMENCE DRILLI CASING TEST AND OTHER: Yearly Bra and give pertinent dates	SUBSEQUENT F	REPORT OF: ALTERING CASI PLUG AND ABA	NDONMENT X
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		L. CLAY		WA I AN EXTENS I ALL FOR	III MANINA A T		505) 374-3058
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