to Appropriate District Office				exico		Form C-103
District Office		Energy, Minerals, a	ınd Natural R	esources Departme	nt	Revised 1-1-89
DISTRICT I		OIL CONSI	ERVATIO	N DIVISION	. [WELL API NO.
P.O. Box 1980, Hobbs.	NM 88240		P.O. Box 20	88		30-021-20090
		C . F N			l l	
DISTRICT II		Santa Fe, N	lew Mexico 87	/504-2088	-	5. Indicate Type of Lease
P.O. Drawer DD, Artes	sia, NM 88210				Ĺ	STATE FEE
DISTRICT III					Je	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd., A	Aztec, NM 87410					
	OUNDEN/	NOTICES AND DED	0070 01114	EL LO		
(DO NO:		NOTICES AND REPO				•
(DO NO)		R PROPOSALS TO DRILL OR T ESERVOIR. USE "APPLICATION		LUG BACK TU A	,	7. Lease Name or Unit Agreement Name
		DRM C-101) FOR SUCH PROP				. Lease Name of Our Agreement Name
		AUM O-10171 OK SOOITT KOIK	OCALO.)	***		PRAYO DOME COS CAS LINIT
1. Type of Well						BRAVO DOME CO2 GAS UNIT
OIL WELL	GAS WEI		OTHER	CO2		
Name of Operator	· · · · · · · · · · · · · · · · · · ·					B. Well No.
-	0.4.4				ľ	
OXY U	SA Inc.					1931-121G
3. Address of Operato	r		 _		Ţ <u>.</u>	9. Pool name or Wildcat
P.O. Bo	x 303, AMISTAD	D, NEW MEXICO 8	38410			BRAVO DOME CO2 GAS UNIT
4 33/=11 Y '		· · · · · · · · · · · · · · · · · · ·		×		
4. Well Location	G 100	ο Λ :===	NORTH	T ime 4	1000	Fact From The FACT V
Unit Letter	G : 198	Feet From The		Line and	1980	Feet From The EAST Line
Section	12	Township	19N	Range 31E	NMPN	1 HARDING County
		10. Elevat	tion (Show whe	ther DF, RKB, RT, GR, etc.)	
			4589	GR_		
	Cl1	I- Ammunista Dam	4- T. 1:4-	National of Nati	. D	Otlean Data
11.	Cneci	k Appropriate Box	to indicate	nature of Noti	ce, Report	, or Other Data
	NOTICE OF I	INTENTION TO:			SUBSE	QUENT REPORT OF:
DEDEODM DEMED	41 MOBIL [DILLIC AND ADANDON		DEMEDIAL WORL	,	ALTERING GARAGE
PERFORM REMEDI	AL WORK	PLUG AND ABANDON		REMEDIAL WORI	`	ALTERING CASING
TEMPORARILY ABA	ANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
OULL OR ALTER C		• .		CASING TEST AN	ID CEMENT IC	NR -
PULL OR ALTER CA	ASING			CASING TEST AIR	ND CEMENT 30	
OTHER:			1 1	OTHER: Yearly 8	Bradenhead Test	(TA Well)
12 Describe Proposed	or Completed Operation			ile and give portinent dat		
SEE RULE 110	or completed operation	c /Cloarly atata	all partinant data		os includina a	stimated data of starting any proposed world
	3.	s (Clearly state	all pertinent detai	is, and give pertinent dat	es, including es	stimated date of starting any proposed work)
		· · ·				
YEAR	MONTH/DAY	TBG. PRESS.	CSG. PR		DOWN TI	
YEAR 1995	MONTH/DAY 6/30	TBG. PRESS. 420#	CSG. PR			
YEAR 1995 1996	MONTH/DAY 6/30 5/24	TBG. PRESS. 420# 420#	CSG. PR 0 0			
YEAR 1995 1996 1997	MONTH/DAY 6/30 5/24 7/8	TBG. PRESS. 420# 420# 420#	CSG. PR 0 0			
YEAR 1995 1996 1997 1998	MONTH/DAY 6/30 5/24 7/8 8/27	TBG. PRESS. 420# 420# 420# 420#	CSG. PR 0 0			
YEAR 1995 1996 1997	MONTH/DAY 6/30 5/24 7/8	TBG. PRESS. 420# 420# 420#	CSG. PR 0 0			
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YEAR 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009 I hereby certify that is SIGNATURE TYPE OR PRINT NAME	MONTH/DAY 6/30 5/24 7/8 8/27 6/22 8/10 1/11 6/18 7/23 7/13 8/10 7/26 11/13 1/22	TBG. PRESS. 420# 420# 420# 420# 425# 430# 425# 430# 435# 435# 440# 435# 430#	CSG. PR 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	dge and belief. Well Analyst	DOWN TI	DATE 1/27/09 TELEPHONE NO. (505) 374-3058
YEAR 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2009	MONTH/DAY 6/30 5/24 7/8 8/27 6/22 8/10 1/11 6/18 7/23 7/13 8/10 7/26 11/13 1/22	TBG. PRESS. 420# 420# 420# 420# 425# 430# 425# 430# 435# 435# 440# 435# 430#	CSG. PR 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	dge and belief.	DOWN TI	DATE 1/27/09 TELEPHONE NO. (505) 374-3058