

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
JAN 11 1982
Form 6-103
OIL CONSERVATION DIVISION
Revised 10-1-

1. Indicate Type of Lease
State ☐ For ☐
2. 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 TO DRILL (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. Firm or Lease Name BDCDGU 1932
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	9. Well No. 341
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 34 TOWNSHIP 19-N RANGE 32-E N.M.P.M.	10. Field and Pool, or Wildcat Und. Tubb
11. Elevation (Show whether DF, RT, GR, etc.) 4641' RDB	12. County Harding

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
FULL OR ALTER CASING ☐ OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐
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.

On 12-10-81 turned well thru a separator and flow tested for 168 hrs. Well flowed 6033 MCF and 226 BLW with an average of 862 MCFD. Ran 72 hr. BHP buildup test 12-17-81 thru 12-20-81. Well shut-in 12-20-81.

0+2-NMOCD, SF 1-Hou 1-Susp 1-CLF 1-Amérada 1-UGI 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. Soranan TITLE Assist. Admin. Analyst DATE 1-11-82

APPROVED BY Carl Wilcox TITLE SENIOR REGIONAL ENGINEER DATE 1-15-82

CONDITIONS OF APPROVAL, IF ANY: