| Submit 3 Copies   | State of New M  |                              | Form C-103                              |
|---|---|------------------------------|---|
| to Appropriate  | Energy, Minerals, and Natural R   | esources Department          | Revised 1-1-89                          |
| District Office   |   |                              |   |
| DISTRICT I  | OIL CONSERVATION  | N DIVISION                   | WELL API NO.                            |
| P.O. Box 1980, Hobbs, NM 88240  | P.O. Box 20   | 88                           | 30-021-20082                            |
| ·   |   |                              |   |
| <u>DISTRICT II</u><br>P.O. Drawer DD, Artesia, NM 88210   | Santa Fe, New Mexico 8  | 7504-2088                    | 5. Indicate Type of Lease STATE FEE     |
| <u>DISTRICT III</u>   |   |                              | 6. State Oil & Gas Lease No.            |
| 1000 Rio Brazos Rd., Aztec, NM 87410  |   |                              | o. State Oil & Gas Lease No.            |
|   | NOTICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A |                              |   |
|   | SERVOIR. USE "APPLICATION FOR PERMIT"                                     |                              | 7. Lease Name or Unit Agreement Name    |
|   | FORM C-101) FOR SUCH PROPOSALS.)  |                              |   |
| 1. Type of Well   | ·   |                              | BRAVO DOME CO2 GAS UNIT                 |
|   | GAS OTHER   | CO2                          |   |
| 2. Name of Operator   |   |                              | 8. Well No.                             |
| AMOCO EXPLORATION AND F   | RODUCTION COMPANY   |                              | 1831-181F                               |
| 3. Address of Operator  |   |                              | 9. Pool name or Wildcat                 |
| P.O. Box 303, AMISTAD,  | NEW MEXICO 88410  |                              | BRAVO DOME CO2 GAS UNIT                 |
| 4. Well Location  |   |                              |   |
| Unit Letter F :   | 1780 Feet From The North  | Line and 1980                | Feet From The West Line                 |
| Section 18  | Township 18N  | Range 31E NMF                | M Harding County                        |
|   | 10. Elevation (Show who   | ether DF, RKB, RT, GR, etc.) |   |
|   | 4455  | GR                           |   |
| n. Che  | eck Appropriate Box to Indicate   | Nature of Notice, Repo       | ort, or Other Data                      |
| NOTICE OF INT   |   | 1                            | JENT REPORT OF:                         |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON  |                              | [                                       |
| <del>  </del>   | Y X X X X X X X X X X X X X X X X X X X                                   | REMEDIAL WORK                | ALTERING CASING                         |
| TEMPORARILY ABANDON   | CHANGE PLANS  | COMMENCE DRILLING OPNS.      | PLUG AND ABANDONMENT                    |
| PULL OR ALTER CASING  |   | CASING TEST AND CEMENT JOB   |   |
| OTHER:  |   | OTHER:                       |   |
| 12. 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. |   |                              |   |
| MIRU plugging unit. Kill well as necessary with fresh water. Nipple up BOP. Release Guiberson Uni 6 packer. Lay down  |   |                              |   |
| production tubing, packer, tailpipe. Run and set with wireline a CIBP @ 2075'. Pressure test casing to 500 psi. Cap CIBP  |   |                              |   |
| with 50 feet of cement. Run 2-3/8" tubing to just above cement cap on CIBP. Displace casing with 9.5# gelled brine water.   |   |                              |   |
| Pull tubing to 1669'. Pump 10 sacks cement. Displace cement from tubing with 9.5# gelled brine water. Pull tubing to a  |   |                              |   |
| depth plus or minus 30 feet. Fill top of casing with cement. Pull final joint of tubing from the well. Check surface casing for   |   |                              |   |
| pressure. Cut off surface casing head. Weld steel plate on top of casing and install PXA marker. RD plugging unit.  |   |                              |   |
| Remove well panels. Cut   | service unit anchors off 1' below   | ground level. Clean location | on.                                     |
|   |   | J                            |   |
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|   |   |                              |   |
| 14.0  | nd complete to the best of my knowledge and belief.                       |                              |   |
| IGNATURE SCHOOL   | TILE  | Operations Specialist        | DATE 10/22/97                           |
| YPE OR PRINT NAME B. E. PRICHARD  | <i></i>   |                              | TELEPHONE NO. (505) 374-3053            |
| This space for State Use)   | Tun ne DI   | STRICT SUPERVIS              | OR DATE 11/4/97                         |
| ONDITIONS OF APPROVAL, IF ANY:  |   | facility is a                | *************************************** |
| <i>V</i>  |   |                              |   |