Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals, and Natural Resources Department			Form C-103 Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONS	SERVATION DIVIS P.O. Box 2088	ION WEL	L API NO. 30-021-20097
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088			icate Type of Lease STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	0		6. Sta	te 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"				se Name or Unit Agreement Name
1. Type of Well	(FORM C-101) FOR SUCH PROPOSALS.)	отнея CO2	ВЯ	RAVO DOME CO2 GAS UNIT
2. Name of Operator AMOCO PRODUCTION CO	MPANY	отнея сог	8. We	ll No. 2031-341G
Address of Operator P.O. Box 303. AMISTAD). NEW MEXICO 88410		· · - · ·	Il name or Wildcat
4. Well Location Unit Letter G	: 1980 Feet From The	NORTH Line		Feet From The EAST Line
Section 34	Township	20N Range ation (Show whether DF, RKB, RI	31E NMPM	HARDING County
11. C	Check Appropriate Bo	x to Indicate Nature o	_	r Other Data
NOTICE OF	INTENTION TO:		SUBSEQUENT R	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL	YORK	ALTERING CASING
TEMPORARILY ABANDON PULL OR ALTER CASING	CHANGE PLANS		E DRILLING OPNS.	PLUG AND ABANDONMENT
OTHER:		OTHER:	Yearly Bradenhead Test (TA Well)	
12. Describe Proposed or Completed Op SEE RULE 1103.	erations (Clearly state all	pertinent details, and give pertinent dates, in	cluding estimated date of starting any p	roposed work)
YEAR MONTH/D 1990 6/29	500#	CSG. PRESS.	BLEED DOWN TIME	
1991 6/19 1992 6/17	500# 490#	0 0		
1993 5/28	490#	0		
1994 6/2 1995 6/30	485# 485#	0		
1996 6/3	485#	0		
1997 7/8 1998 1999 2000	485#	0		
2000				
hereby cartify that the information above is tr SIGNATURE	rue and complete to the best of my knowled	ge and belief. 11 TLE Field Tach.		DATE <u>9/4/97</u>
TYPE OR PRINT NAME		<u> </u>		TELEPHONE NO. (505) 374-3058
(This space for State Use) APPROVED BY	bhu-	nne DISTRICT	SUPERVISO	K DATE 9-11-97
CONDITIONS OF APPROVAL, IF ANY:			· · · · · · · · · · · · · · · · · · · 	· · · · · · · · · · · · · · · · · · ·