CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Department

DISTRICT: FOUR BOX PROB. Hobbs, NM 8310  DISTRICT: FOUR BOX PROB. Hobbs, NM 8310  Sania Fe, New Mexico 87504-2088  Sania Fe, New Mex	P.O. Box 1990, Hobels, Mr. 95200  P.O. Box 1990, Hobels, Mr. 95200  P.O. Box 1990, Hobels, Mr. 95200  Santa Fe, New Mexico 87504-2088  Sundard Te, Santa Gill & Gist Lease No.  Santa Gill & Gist Lease No.  Santa Fe, New Mexico 87504-2088  Sundard Te, Santa Gill & Gist Lease No.  Santa Fe, New Mexico 87504-2088  Santa Fe, New Mexico 87504-2088  Sundard Te, Santa Gill & Gist Lease No.  Santa Fe	to Appropriate District Office	Energy, Minerals ar	id Natural K	esources Departme	ent		Kevise	1 1-1-09
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2. Name of Operator   1831-151F   Amono Freduction Company   1831-151F   3. Address of operator   P.O. Box 606, CLAYTON, NEW MEXICO 88415   9. Pool name or Wild-set   BRAVO DOME CO2 GAS UNIT   4. Well Lossion   Unit Letter   F   1380   Feet From The   NORTH   Line and   1980   Feet From The   EAST   Line	2. Name of Operator   1831-161F   3. Address of population Company   1831-161F   9. Pool name or Wildest   P.O. Box 808. CLAYTON, NEW MEXICO 88415   9. Pool name or Wildest   BRAVO DOME CO2 GAS UNIT   4. Well Lossion   Unit Letter   F   1980   Feet From The   NORTH   Line and   1980   Feet From The   EAST   I   Section   16   Township   18N   Range   31E   NMPM   HARDING   County   4340 GR   10. Elevation (Show whether DE, RKS, RT, GR, etc.)   4340 GR   11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data   NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   REMEDIAL WORK   ALTERING CASING   REMEDIAL WORK   ALTERING CASING   COMMENCE ORILLING OPNS.   FLUG AND ABANDONMENT   CASING TEST AND CEMENT JOB   OTHER:   YEARLY BRADENHEAD TEST (TA WELL)   POTHER:   YEARLY BRADENHEAD TEST (TA WELL)   19. POTHER:   Size   OTHER:   YEARLY BRADENHEAD TEST (TA WELL)   19. POTHER:   Size   OTHER:   YEARLY BRADENHEAD TEST (TA WELL)   19. POTHER:   Size   OTHER:   Siz								
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Section 16 Township 18N Range 31E NMPM HARDING County    10. Elevation (Show whether DF, RKB, RT, GR, etc.)   4340 GR	Section 16 Township 18N Range 31E NMPM HARDING County  10. Elevation (Show whether DF, RKB, RT, GR, etc.)  4340 GR  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING FEMPORARILLY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHER:  OTHER: YEARLY BRADENHEAD TEST (TA WELL)  12. Describe Proposal of Completed Operations (Clearly state all perment details, and give perment dates, including estimated date of starting any proposed work) SEB RULE (103).  YEAR MONTH, DAY TUBING PRESSURE CASING PRESSURE BLEED DOWN TIME  1991 JUNE 22 S289 O  1992 JUNE 17 5307 O  1992 JUNE 17 5307 O  1993 JUNE 17 5307 O  1994 JUNE 17 5307 O  1995 TWICE 17 5307 O  1996 NAY 23 5104 O  1997 O  1998 NAY 23 5104 O  1999 NAY 23 5104 O  1996 NAY 23 5104 F  OTHER: PIELD TECH.  DATE & SS-46  MARKED AND THE START OF THE				<del></del>		BNA	VO DOINE COZ GAS	S UNIT
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12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEB RULE (10).  YEAR MONTH:DAY TUBING PRESSURE CASING PRESSURE BLEED DOWN TIME  1990 JUNE 22 525# 0  1991 JUNE 17 530# 0  1992 JUNE 16 815# 0  1993 MAY 28 515# 0  1994 MAY 27 510# 0  1995 Table 9 510# 0  1996 NAY 23 570# 6  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  CHARLES MAY LAY TIME FIELD TECH.  DATE \$55-96	12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEB RULE 1103.  YEAR MONTH:DAY TUBING PRESSURE CASING PRESSURE BLEED DOWN TIME  1990 JUNE 22 525# 0  1991 JUNE 17 530# 0  1992 JUNE 16 515# 0  1993 MAY 28 515# 0  1994 MAY 27 510# 0  1995 Tune 9 510# 0  1996 NAY R3 50# 6  Chereby certify that the information above is true and complete to the best of my knowledge and belief.  Increase of the complete to the best of my knowledge and belief.  INCRATURE M. CLAY.  MILITARY TILLE FIELD TECH.  DATE \$5.5.46	PULL OR ALTER CASING			CASING TEST AN	ND CEME	T JOB		
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YPE OR PRINT NAME M.L. CLAY TELEPHONE NO. (505) 374-305	YPE OR PRINT NAME M.L. CLAY TELEPHONE NO. (505) 374-30	GIGNATURE M. J. E	lay	тг	TLEFIE	ELD TECH	ł	DATE & S-C	5-96
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