

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Denver DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-021-20136

5. Indicate Type of Lease

STATE ☐

FED ☐

6. 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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

CO2

OTHER

2. Name of Operator

Amoco Production Company

3. Address of Operator

P. O. Box 3092; Houston, TX 77253

4. Well Location

Unit Letter F 1980

Feet From The NORTH

Line and 1980

Feet From The WEST

Line

Section 17

Township T21N

Range R33E

NMPM

HARDING

County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)

4840

640 Acre Area

9. Lease Name or Wildcat Bravo Dome
Carbon Dioxide Gas Unit

8. Well No.

2133 171F

11. 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 ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Yearly Bradenhead Test (TA Well) ☒

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.

YEAR	MONTH/DAY	TUBING PRESSURE	CASING PRESSURE	BLEED DOWN TIME
1990	10/26	330#	0	
1991				
1992				
1993				
1994				
1995				
1996				
1997				
1998				
1999				
2000				

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

C. M. Long

TITLE

SR ADMINISTRATIVE ANALYST

DATE

12/13/90

TYPE OR PRINT NAME

C. M. LONG

713-556-3216

TELEPHONE NO.

(This space for State Use)

APPROVED BY

Ry E Johnson

TITLE

DISTRICT SUPERVISOR

DATE

11-91

CONDITIONS OF APPROVAL, IF ANY

AUTHORIZATION FOR MAINTENANCE IN SHUT-IN OR
TEMPORARY ABANDONMENT STATUS EXPIRES 10-26-91

BDCDGU WELL NO.2133-171 F
 STATE JN NO.1 API NO.50-021-20136
 1980'FNL X 1980'FWL,SEC.17,T-21-N-R-SS-E
 HARDING COUNTY NEW.MEXICO

