

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

OIL CONSERVATION DIVISION
P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

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

WELL API NO.	30-021-20138
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Bravo Dome Carbon Dioxide Gas Unit
8. Well No.	2033-301G
9. Pool name or Wildcat	Bravo Dome CO2 Gas Unit
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	5090

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> CO2 - Gas Well	
2. Name of Operator Amoco Production Company	
3. Address of operator P.O. Box 606 Clayton N. Mex 88415	
4. Well Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 30 Township 20N Range 33E NMPM Harding County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5090	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Re-enter well and run CIBP to Shut Off Water Prod. <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>

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.

1. Move in, rig up service unit (scheduled for) April 5, 1993.
2. Kill well W/2 % KCL water x necessary additives.
3. Nipple up blow out preventer
4. Release packer and pull out of hole with 2 3/8 tubing, packer, and tail joints.
5. Set cast iron bridge plug at 2587'
6. Run in hole as follows:
 - A. 1 JT 2-7/8 Fiberglass tubing
 - B. 5-1/2 x 2-7/8 Guiberson uni 6 packer. Set packer at 2472'
 - C. Guiberson XL on/off tool w/1.625" ID profile.
 - D. 2-7/8 Fiberglass tubing
 - E. 2-7/8 13% Chrome landing sub.
7. Load annulus with inhibited fluid and test packer to 500 psi for 30 minutes.
8. Swab as necessary to return to production.
9. Flow test well for 3 days with 150 psi back pressure, report daily MCFD x BWPD. Return to shut-in status.

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

SIGNATURE <u>Joy Filkins</u>	TITLE <u>Secretary</u>	DATE <u>3/30/93</u>
TYPE OR PRINT NAME <u>Joy Filkins</u>		TELEPHONE NO. (713) 556-3613

(This space for State Use)

APPROVED BY <u>[Signature]</u>	TITLE <u>DISTRICT SUPERVISOR</u>	DATE <u>4-2-93</u>
CONDITIONS OF APPROVAL, IF ANY:		

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OIL CONSERVATION DIVISION

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

OIL CONSERVATION DIVISION
RECEIVED
DEC 1 1992

WELL API NO. 30-021-20138
Indicate Type of Lease
STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
BRAVO DOME CO2 GAS UNIT

8. Well No.
2033-301G

9. Pool name or Wildcat
BRAVO DOME CO2 GAS UNIT

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 ☐ OTHER CO2

2. Name of Operator
Amoco Production Company

3. Address of operator
P.O. Box 606, Clayton, New Mexico 88415

4. Well Location
Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line
Section 30 Township 20N Range 33E NMPM HARDING County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
5090 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: YEARLY BRADENHEAD TEST (TA WELL) <input checked="" type="checkbox"/>	

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	OCT. 26	325#	0	
1991	SEPT. 20	320#	0	
1992	SEPT. 20	320#	0	
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 M. L. Clay TITLE FIELD TECH DATE 12-4-92
TYPE OR PRINT NAME M. L. CLAY TELEPHONE NO. (505) 374-3053

(This space for State Use)
APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 12-16-92
CONDITIONS OF APPROVAL, IF ANY:

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

WELL API NO. 30-021-20138
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
8. Well No. 2033-301G
9. Pool name or Wildcat Bravo Dome CO2 Gas Unit

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5090 GR

SUNDRY NOTICES AND REPORTS ON WELLS
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(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER CO2
2. Name of Operator Amoco Production Company
3. Address of Operator P. O. Box 606, Clayton, NM 88415
4. Well Location Unit Lener G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 30 Township 20N Range 33E NMPM Harding County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Flow Test <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Flow test well for verification of gas and water production rates.
One day to stabilize flow, 3 day flow test.

After completion of flow test, well will be returned to shut in.

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

SIGNATURE Billy E. Prichard TITLE Field Foreman DATE 3/18/93

TYPE OR PRINT NAME Billy E. Prichard TELEPHONE NO 505-374-305

(This space for State Use)

APPROVED BY Ry E. Johnson DISTRICT SUPERVISOR DATE 3-29-93
CONDITIONS OF APPROVAL IF ANY: