

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON OIL & GAS WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO OIL OR GAS WELLS)
(USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☒ CO2 OTHER _____	7. Unit Agreement Name BDCDGI
2. Name of Operator Amoco Production Company	8. Farm or Lease Name BDCDGI
3. Address of Operator P. O. Box 68, Hobbs, New Mexico 88240	9. Well No. 1933 251M
4. Location of Well UNIT LETTER <u>G</u> <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>25</u> TOWNSHIP <u>19-N</u> RANGE <u>33-E</u> NMPM.	10. Field and Pool, or Wildcat Und. Tubb
15. Elevation (Show whether DF, RT, GR, etc.) 4840' GL	12. County Harding

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

17. 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.

Moved in service unit 10-24-83. Perforated 2489'-2493', 2498'-2521', 2525'-2536', 2538'-2542', 2546'-2566' and 2569'-2576' with 2 SPF. Acidized with 2000 gal 7-1/2% HCL and additives. Flow tested thru a separator at an average of 700 MCFD for 166 hours. Shut in well 11-9-83.

0+2-NMOCD,SF 1-HOU R. E. Ogden RM 21.150 1-SUSP 1-PJS 1-Amerada 1-Amerigas
1-Cities Service 1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun. Tex. 1-Exxon
1-Jim Russell, Clayton 1-F. J. Nash, HOU RM 4.206

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

SIGNED Peter J. Lema TITLE Assist. Admin. Analyst DATE 11-23-83

APPROVED BY _____ TITLE _____ DATE 11/30/83

CONDITIONS OF APPROVAL, IF ANY: