

**STRICT I**

Box 1980, Hobbs, NM 88240

**STRICT II**

Drawer DD, Artesia, NM 88210

**STRICT III**

00 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

**WELL API NO.**

30-021-20182

**5. 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.**

1933-041G

**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.)

**Type of Well**

OIL WELL ☐ GAS WELL ☐ OTHER CO2

**Name of Operator**

AMOCO PRODUCTION COMPANY

**Address of Operator**

P.O. Box 303, AMISTAD, NEW MEXICO 88410

**Well Location**

Unit Letter G 1650 Feet From The North Line and 1650 Feet From The East Line  
Section 4 Township 19N Range 33E NMPM Harding County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
4970 GR

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

**NOTICE OF INTENTION TO:**

REFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
REPAIR OR ALTER CASING ☐  
OTHER ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

Describe Proposed or Completed Operations  
SEE RULE 1103.

(Clearly state all pertinent details and give pertinent dates, including estimated date of starting any proposed work)

MIRUSU, kill well as necessary, NUBOP, release packer, lay down production tubing and packer, run workstring to 2,475 feet, spot 43 sacks of cement, pull workstring, WOC, run workstring, tag cement, cement should be above 2,358 feet, pressure test casing to 500 psi, displace casing with mud laden fluid, pull workstring to 1,992 feet, spot 20 sacks of cement, pull workstring to 30 feet and fill casing with cement, NDBOP, cut off wellhead, install PXA marker, RDMOSU, cut off well anchors and clean location.

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

NATURE D. Holcomb TITLE Field Foreman

DATE 8-18-99

NAME OR PRINT NAME Danny J. Holcomb

TELEPHONE NO. (505) 374-3010

(Leave space for State Use)

APPROVED BY [Signature]

TITLE DISTRICT SUPERVISOR

DATE 8/23/99

CONDITIONS OF APPROVAL IF ANY