

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	☒
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. 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. ☐ OIL WELL ☒ GAS WELL ☐ OTHER- C02		7. Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
2. Name of Operator AMOCO PRODUCTION COMPANY		8. Farm or Lease Name Bravo Dome Carbon Dioxide Gas Unit
3. Address of Operator P.O. BOX 68, HOBBS, NEW MEXICO 88240		9. Well No. 1833 131G
4. Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>13</u> TOWNSHIP <u>18-N</u> RANGE <u>33-E</u> NMPM.		10. Field and Pool or Whist Bravo Dome Carbon Dioxide Gas Unit 640-Acre Area
15. Elevation (Show whether DF, RT, GR, etc.) 4770' GL		12. County Harding

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

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.

Rig up frac company 5-20-87 and frac well with 37 bbls 40# HEC gelled 2% KCl FW, 10,000# 8/16 sand and 12 tons CO₂. Shut-in well for 1 hour and open to tank and flow for 7 hours. Return to production.

PPWO: 750 MCFD at 159 psi

PAWO: 930 MCFD at 163 psi

0+5-NMOCD,SF 1-R.A. SHEPPARD Houston 1-Tim Thiel, Houston
1-OMM1-Amerada Hess 1-Amerigas 1-Cities Service 1-Conoco 1-CO2 in Action 1-San SHELL
1-Exxon

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

SIGNED

TITLE

Admin. Analyst

DATE

7-20-87

APPROVED BY

TITLE

DISTRICT SUPERVISOR

DATE

7-27-87

CONDITIONS OF APPROVAL, IF ANY: