	_ Submit 3 Copies to Appropriate	Sta Energy, Minerals a	nte of New Med and Natural Re	KICO ISES Sources Department	lt Girrar	Form C-103 / Revised 1-1-89		
District Office							- 0,	
	DISTRICT I P.O. Box 1980, Hobbs, NM 88240	Box 1980, Hobbs, NM 88240 WELL API NO.						
]	<u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210	TRICT II Santa Fe. New Mexico 87504-2088						
]	DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 874	110				Type of Lease STATE  I & Gas Lease No.	FEE 🗌	
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.)					/. Lease N	arne or Unit Agreement Name OME CO2 GAS UNIT		
1	. Type of Well OIL GAS WELL WELL WELL			CO2				
2	. Name of Operator		OTHER		8. Well No	· · · · · · · · · · · · · · · · · · ·		
ſ	moco Production Company				6. Well No	1833-251J	l	
3	. Address of operator		<del></del>		9. Pool nar	ne or Wildcat		
P	O. Box 606, Clayton,	NM	88415		E	BRAVO DOME CO2 GAS L	JNIT	
4.	Well Location							
	Unit Letter :	1980 Feet From The	SOUTH	Line and	1960 Fee	t From The EAST	Line	
	Section 25	Township	18 <b>N</b> F	Range 33E	NMPM	HARDING	County	
		10. Elev	ation (Show whethe	er DF, RKB, RT, GR, etc 4752 GL	.)			
1	l. Chack	Appropriate Boy	to Indicate		Poport or (	Othor Doto		
check Appropriate Box to indicate Pattire of Profice, Report, of Other Data								
NOTICE OF INTENTION TO:					2082EG0EN	TI REPORT OF:		
PE	RFORM REMEDIAL WORK	PLUG AND ABA	NDON	REMEDIAL WORK	<	ALTERING CASING		
TE	MPORARILY ABANDON X	CHANGE PLAN	s 📙	COMMENCE DRIL	LING OPNS.	PLUG AND ABANDO	DNMENT	
PL	ILL OR ALTER CASING	_		CASING TEST AN	D CEMENT JOB			
OT	THER:		Ц	OTHER:				
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.								
Well shut in due to low or no production. Well shut in 10/29/92 indefinitely.								
		$\bigcirc$						
Ī	hereby certify that the information ab	ove is true and complete to	the best of my kno	wledge and belief.		<del></del>		
S	SIGNATURE BULLY	E. Krieba		TITLE FIE	LD FOREMAN	DATE 11/6/	92	
1	TYPE OR PRINT NAME B. E. PRICH	ARD		·		TELEPHONE NO.	(505) 374-3053	
_								

(This space for State Use)

DISTRICT SUPLAVISOR DATE 12-1-92

CONDITIONS OF APPROVAL, IF ANY: ,

## BDCDGU WELL,1833-251J API NO.30-021-20200 1980'FSL X 1980'FEL,SEC.25,T-18-N,R-33-E HARDING COUNTY,NEW MEXICO

