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 10-1-7

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 ☒ CO2 OTHER-

7. Unit Agreement Name: BDCDGU

2. Name of Operator: Amoco Production Company

8. Farm or Lease Name: BDCDGU

3. Address of Operator: P. O. Box 68, Hobbs, New Mexico 88240

9. Well No.: 1935 271G

4. Location of Well: UNIT LETTER G, 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE, SECTION 27 TOWNSHIP 19-N RANGE 35-E NMPM.

10. Field and Pool, or Wildcat: Und. Tubb

15. Elevation (Show whether DF, RT, GR, etc.): 4558' GL

12. County: Union

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 ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		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.

Moved in completion unit 10-28-83. Perforated 2045'-2098', 2101'-2184', 2186'-2209' and 2213'-2239' with 2 JSPF. Acidized with 4500 gal 7-1/2% HCL acid. Flow tested thru a separator at an average of 4000 MCFD for 338 hours. Shut in well 11-22-83.

O+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 Patty Serna TITLE Assist. Admin. Analyst DATE 12-28-83

APPROVED BY _____ TITLE _____ DATE 1-6-84

CONDITIONS OF APPROVAL, IF ANY: