## BDCDGU 1934-182

## 8/10/03

MI & RUWL R Compensated Neutron, Gamma Ray, Collar Log PBTD 2458'

# 8/18/03

MI & RUSU R 2.375 Tbg to 2442' Swb Well Dry P & LD Tbg RD & MOSU Dump 5 BBL 15% HCL Acid + 5 BBL 6% KCL

# 8/20/03

MI & RUWL R 3.125" Perf Gun Perforate 4 DPJSPF 2226' to 2236', 2246' to 2266' 2271' to 2351', 2356' to 2366', 2380' to 2400' = 560 Holes @ .42" each Flow well to Production @ 1.3 MMCF/day

# 8/28/03

Frac Down Casing with 323 BBL gel KCL mixed with 64 Tons of CO2
Containing 614 sx 12/20 Brady Sand
Max TP - 1589 psi Avg TP - 1300 psi Max IR - 46 bpm AIR - 42 bpm
ISIP - 1270 psi 5 min SIP - 650 psi 10 min SIP - 490 psi 15 min SIP - 452 psi
Flow well to Pit on .50" Choke

Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources	Form C-103 Revised March 25, 1999
District I 1625 N. French Dr., Hobbs, NM 87240	WELL API NO.
District II 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION	30-059-20406
District III 2040 South Pacheco	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV.	STATE FEE X
2040 South Pacheco, Santa Fe, NM 87505	6. 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. Type of Well:  Oil Well:  Oil Well:  Other CO2 Supply Well  2. Name of Operator	7. Lease Name or Unit Agreement Name:  Bravo Dome Carbon Dioxide Gas Unit 1934  8. Well No.
OXY USA Inc. 16696	182
3. Address of Operator	9. Pool name or Wildcat
P.O. Box 50250 Midland. TX 79710-0250	Bravo Dome Carbon Dioxide Gas 640
4. Well Location	
Unit Letter L: 1988 feet from the south line and	460 feet from the west line
Section 18 Township 19N Range 34E	NMPM County Union
10. Elevation (Show whether DR, RKB, RT, GR, etc. 4908.1'	
11. Check Appropriate Box to Indicate, Nature of Notice,	Report, or Other Data
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	NG OPNS.  PLUG AND  ABANDONMENT
PULL OR ALTER CASING	
OTHER: Completio	
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	
See Other Side	
	2
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE Sr. Regulatory Analyst DATE 9/3/03	
Type or print name David Stewart	Telephone No. 432-685-5717
(This space for State use)	2//
APPROVED BY TITIOISTRICT SUF	PERVISOR DATE 7/8/03