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 10-1-73

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. CO2

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, NM 88240

9. Well No.
1835 101K

4. Location of Well
UNIT LETTER K , 2080 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 10 TOWNSHIP 18-N RANGE 35-E NMPM.

10. Field and Pool, or Wildcat
Bravo Dome Carbon Dioxide Gas Unit 640-Acre Area

15. Elevation (Show whether DF, RT, GR, etc.)
4591' 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 successful repair of casing leak ☐	

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.

Please reference C-103 approved 9-2-86. No additional work performed.

PPWO: 1700 MCFD at 210 psi
PAWO: 1700 MCFD at 210 psi

O+2-NMOCD,SF 1-R.A. Sheppard HOU. Rm. 20.156 1-F.J. Nash HOU. Rm. 17.188 1-SBB
1-CMH 1-Amerada Hess 1-Amerigas 1-Cities Service 1-Conoco 1-CO2 in Action 1-Shell
1-Exxon 1-WF, Hobbs

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

SIGNED Steve Brownlee TITLE Admin. Analyst DATE 11-3-86

APPROVED BY [signature] TITLE DISTRICT SUPERVISOR DATE 11-5-86

CONDITIONS OF APPROVAL, IF ANY: