

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 10-1-78

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- CO ₂	7. Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Field or Lease Name Bravo Dome Carbon Dioxide Gas Unit
3. Address of Operator P.O. BOX 68, HOBBS, NEW MEXICO 88240	9. Well No. 1935 011K
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 19-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.) 4520' GL	12. County Union

10. 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 perform water test ☒

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.

Propose to water test by venting to atmosphere. MIRU test separator. Flow test three days. Vent well to atmosphere in order to get maximum flow rate. Gauge water daily. RDMO test separator and return well to shut-in status.

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

SIGNED Steve Brownlee
STEVE BROWNLEE

TITLE ADMINISTRATIVE ANALYST

DATE 8/18/86

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE DISTRICT SUPERVISOR

DATE 8-22-86