STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE	/	
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED JAN 17 1983 OIL CONSERVATION DIVISION

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease: State ☐ Fee ☐
5b. 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 1934

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

9. Well No.: 301

4. Location of Well: UNIT LETTER G, 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 30 TOWNSHIP 19-N RANGE 34-E NMPM.

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

15. Elevation (Show whether DF, RT, GR, etc.): 4913' 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.

Propose to repair tubing/packer leak as follows:

Pull tubing and packer. Run in hole with tubing and packer using special thread lubricant on box to seal connections. Pump annular volume of 2% KCl inhibited water down backside and set packer. Finish loading backside to surface. Pressure test backside for leaks. Swab to kick off and flow 2 hours to recover load water. Shut-in well.

O+2-NMOCD,SF 1-HOU 1-SUSP 1-CLF 1-Amerada 1-Amerigas
1-Conoco 1-CO2-In-Action 1-Cities Svc. 1-Sun Tex. 1-Excelsior

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

SIGNED Cathy L Iorman TITLE Asst. Admin. Analyst DATE 1-12-83

APPROVED BY Paul Kautz TITLE DISTRICT SUPERVISOR DATE 1/18/83

CONDITIONS OF APPROVAL, IF ANY: