Submit 3 Copies	State	e of New Me	xico				Form C-103			
to Appropriate District Office	Energy, Minerals, and Natural Resources Department				Revised 1-1-89					
DISTRICT I	OIL CONSE	RVATIO	N DIVISION	J	WELL A	PI NO.				
P.O. Box 1980, Hobbs, NM 88240			30-059-20081							
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088				5. Indicate Type of Lease STATE FEE					
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741	.0				6. State O	il & Gas Le	ase No.			
	DRY NOTICES AND REPOR	RTS ON WE	LLS	· · · · · · · · · · · · · · · · · · ·	1 (1)	NA SANT				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A						Vame or Uni	t Agreement Nar	ne		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)										
1. Type of Well OIL	GAS 🗍				BRAV	O DOME CO	2 GAS UNIT			
WELL		OTHER (002		O W.U.N.					
2. Name of Operator AMOCO PRODUCT	ION COMPANY				8. Well No. 2232-131G					
3. Address of Operator	ION COMPANY				9. Pool name or Wildcat					
	MISTAD, NEW MEXICO	88410			BRAV	O DOME CO	2 GAS UNIT			
Well Location		Non-	• • • •	1000	**	For W	FAOT			
Unit Letter G	: 1980 Feet From The Township	NORTH 22N I	Line and Range 32E	1980 NMF		eet From The UNION	EAST Coun	Line		
Section 13	10. Elevation		ner DF, RKB, RT, GR,		101	ONION				
		5015	GR							
11.	Check Appropriate Box t	o Indicate	Nature of N	otice, Repo	ort, or O	ther Data				
NOTICE	OF INTENTION TO:			SUBSE	QUENT F	REPORT O	F:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL W	ORK		ALTE	RING CASING			
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE D	RILLING OPNS		PLUG	AND ABANDONM	ENT		
PULL OR ALTER CASING				AND CEMENT						
OTHER:				ly Bradenhead Te						
 Describe Proposed or Completed Op SEE RULE 1103. 	perations (Clearly state al.	ll pertinent deta	ils, and give pertin	ent dates, incl	uding estima	ited date of s	tarting any propose	d work)		
YEAR MONTH/D		CSG. P	RESS. BI	EED DOW	N TIME					
1990 9/27	325#	0								
1991 9/20	310#	0								
1992 9/17	315#	0								
1993 6/8	315# 310#	0								
1994 7/12	310#	O						1		
1995 1996 6/4	310#	0								
	310#	0								
	310#	0								
	310#	0								
1	310#	0								
2000 9/12	310#	, 0								
hereby certify that the informati	on above is true and complete to t	the best of my	knowledge and be	lief.						
SIGNATURE M	Play		ield Tech.			DATE	9/13/00			
TYPE OR PRINT NAME M. L. CL	AY ()					TELEPHONE	NO. (505) 374-3	058		
(This space for State Use)	20/2/	Di	STRICT S	SUPFRV	ISOR	DATE 9	14/00			
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	7 15/1	- mre	<u> </u>	I FILT			16 1/0-			
CONDITIONS OF AFTICOTAC, ICANIC.	' /									

Submit 3 Copies	St	ate of New M	Mexico			Fo	rm C-103
to Appropriate	Energy, Minerals,	Revised 1-1-89					
District Office		WIN I WINIUI		110	11000 1 1 00		
District milica	OH CONO	DDV/TI	N NITIO	TON	******	1 DE NO	
<u>DISTRICT I</u>	OIL CONS	WELL.	API NO.				
P.O. Box 1980, Hobbs, NM 88240		30-059-20081					
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, I		te Type of Lea	se FEE			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741	10				6. State (Oil & Gas Leas	se No.
(DO NOT USE THIS FORM FOR	DRY NOTICES AND REPORTS OF	BACK TO A			7 Logso	Nama ar Unit	Agreement Name
UNTERE	NT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)				7. Lease	Ivame of Onic.	Agreement Name
1. Type of Well					BRAVO	DOME CO2 GAS UN	IIT
ON MELL	GAS WELL	OTHER	C02				
2. Name of Operator		·			8. Well N	lo.	
AMOCO PRODUCTION CO	JMPANY					2232-131G	
3. Address of Operator					9. Pool na	ame or Wildca	t
P.O. Box 303, AMISTAI	D, NEW MEXICO 88410	· · · · · · · · · · · · · · · · · · ·	,	· · · · · · · · · · · · · · · · · · ·	BRAVO	DOME CO2 GAS UN	IT
4. Well Location							
Unit Letter G	: 1980 Feet From The	NORTH		e and 1980		Feet From The	EAST Line
Section 13	Township	22N	Range		1PM	UNION	County
	10. Elevat	ion (Show who	ether DF, RKB, R GR	T, GR, etc.)			
11.	Check Appropriate Box	to Indicate	e Nature o	f Notice, Rej	ort, or C	ther Data	
NOTICE OF	INTENTION TO:		I	SUBSE	QUENT REPO	IRT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL \	WORK		ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	Ħ	COMMENCE	E DRILLING OPNS.	片		ABANDONMENT
ļ <u>-</u>		Ш	}		님	7 200 2410	ADAITUGI MENT
PULL OR ALTER CASING			CASING IES	ST AND CEMENT JOB			
OTHER:			OTHER;	Yearly Bradenhead Test (TA			X
12. Describe Proposed or Completed Op SEE RULE 1103.				cluding estimated date of s		ed work)	
YEAR MONTH/D		CSG. P	RESS.	BLEED DOW	N TIME		
1990 9/27 1991 9/20	325# 310#	0					
1992 9/17	315#	0					
1993 6/8	315#	0					
1994 7/12	310#	Ö					
1995	··	-					
1996 6/4	310#	0					
1997 9/4	310#	0					
1998 6/11	310#	0					
1999							
2000							
				2			
hereby certify that the information above is to	we and complete to the best of my knowledge	and ballef.					
SIGNATURE M. J.	Clay		Field Tech.			DATE 8/26/	98
TYPE OR PRINT NAME M. L. CLAY		. .				TELEPHONE NO.	(505) 374-3058
This space for State Use)	(a) //		AND REST. DE	(** * * *** *** * * * * * * * * * * * *	73 P3 75	TELL HORE BU	/ /
I PPROVED BY	Cokenn	nne Di	STRICT	SUPERVI	SOR	DATE 9/	16/98
ONDITIONS OF APPROVAL, IF ANY:	//						-,