

OIL CONSERVATION DIVISION

P. O. BOX 204
SANTA FE, NEW MEXICO 87501

Form O-113
Revised 12-1-77

NAME OF OPERATOR		
DISTRIBUTION		
SANCTUARY		
FILE		
UNIT NO.		
LAND OFFICE		
OPERATOR		

1. Well No.	2. Type of Lease
3. Date On & Off Lease No.	

SONDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR A PROPOSAL TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (OIL) FOR SUCH PROPOSALS.)

1. Well ☐ OIL ☒ GAS ☐ CO₂ ☐ OTHER

Bravo Dome Carbon Dioxide Gas Unit

2. Name of Operator
Amoco Production Company

Bravo Dome Carbon Dioxide Gas Unit 2035

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

4. Well No.
201 ~~6~~

5. Location of well
UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 20 TOWNSHIP 20-N RANGE 35-E MAP.

6. Field and Pool, or offset
Und. Tubb

7. Elevation (Show whether DE, RT, GR, etc.)
4650 GL

8. County
Union

9. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER Name Change ☒

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☒

REMEDIAL WORK ☐
COMMENCE DRILLING (PNS) ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

10. Describe Proposed or Changed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1101.

Name changed from Mykelbust B No. 1

to Bravo Dome Carbon Dioxide Gas Unit 2035 Well No. 201 ~~6~~

0+2 NMCD-GF 1-Hou 1-Susp 1-BD

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

SIGNED Bob Davis

TITLE Admin. Analyst

DATE 4-13-81

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____