

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87401

Form O-103
Revised 10-1-80

NAME OF OPERATOR	
DISTRIBUTION	
SANITARY	
FILE	
U.S.A.S.	
LAND OFFICE	
OPERATION	

10. Indicate Type of Lease
State ☐ Fee ☐
11. State Oil & Gas Lease No.

SUNDY 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 TO DRILL (FORM O-101) FOR SUCH PROPOSALS.)

1. Name of Operator Amoco Production Company	2. Well No. 211
3. Address of Operator P. O. Box 58, Hobbs, NM 88240	4. Field and Pool, or adjacent Und. Tubbs
5. Location of Well UNIT LETTER F FEET FROM THE North LINE AND 1980 West THE LINE, SECTION 21 TOWNSHIP 20-N RANGE 35-E N.M.P.M.	6. Elevation (Show whether DF, RT, GR, etc.) 4630 GL
7. County Union	

10. 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPERATIONS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☒ Name Change	CASING TEST AND CEMENT JOBS ☐	

11. Description of Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1193.

Name changed from Mykelbust C No. 1

to Bravo Dome Carbon Dioxide Gas Unit 2035 Well No. 211

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

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

SIGNED Bob Davis TITLE Admin. Analyst DATE 4-13-81

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: