Submit 3 Copies	France MC and Network Presenter Department			ont	Form C-103 Revised 1-1-89			
to Appropriate District Office				CIII		Revised 1-1-09		
<u>DISTRICT I</u>	OIL CONS	ERVATION	DIVISION	Ī	VELL API NO.	••••••••••••••••		
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088				30-059-20118				
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			04-2088	5	5. Indicate Type of Lease STATE FEE			
<u>1)1STRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410				6	. State Oil & Gas	Lease No.		
	NOTICES AND REF				. <u></u>			
(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.)				7	7. Lease Name or Unit Agreement Name			
1. Type of Well					BRAVO DOME CO2 GAS UNIT			
	AS TELL	OTHER C	:02					
2. Name of Operator				8	. Well No.		··	
AMOCO PRODUCTION COMPANY					1935-241J			
3 Address of Operator					9. Pool name or Wildcat			
P.O. Box 303, AMIST	AD, NEW MEXICO	88410			BRAVO DOME	CO2 GAS UNIT		
4. Well Location Unit Letter J :	1980 Feet From The	South	Line and	1980	Feet From The	East	Line	
Section 24	Township		ange 35E	NMPM			unty	
	10. Eleva		r DF, RKB, RT GR, etc GL	с. <i>ј</i>				
					t on Other Det			
	ck Appropriate Box		valure of Not	-	QUENT REPOR			
	INTENTION TO:						r	
	PLUG AND ABANDON		REMEDIAL WOR			TERING CASING		
	CHANGE PLANS		COMMENCE DR			UG AND ABANDONI		
PULL OR ALTER CASING			CASING TEST AI	ND CEMENT JO	B		r	
OTHER:			OTHER				<u>    l     </u>	
12. Describe Proposed or Completed Operati SEE RULE 1103.	ons (Clearly state	all pertinent details.	and give pertinent dat	tes, including est	imated date of starting	any proposed work)		
6/9/00 MIRUSU, CPC 240 psi, TP down overnight due to light		own tubing witl	n produced wat	er, NUBOP	, release produc	ction packer, sh	ut	
6/10/00 CPC 200 psi, TPC 200psi, collar. Run 1 joint of 2 7/8" fiberglass production tubing 500 psi, ok, NDBOP, load to return well to production	' tail pipe, 2 7/8' X 5 1 g, tail pipe landed at 1	I/2" packer wit 1847', packer	h on/off tool, 2 <sup>·</sup> set at 1817', on	7/8" X 2 3/8 /off tool land	" changeover, 5 ded at 1809', pre	9 jts of 2 3/8" essure test pac	ker to	
I hereby certify that the information above	e is true and complete to the t	est of my knowledge	and belief				]	
signature	comb-		eld Foreman		DATE	6-19-2000		
TYPE OR PRINT NAME Danny J Ho	lcomb				TELEPHO	ONE NO. (505) 374	-3050	
(This space for State Use	lohum-	TITLDIS	TRICT SU	PERVIS	₩ 23 ₩ DATE	6/27/00		
CONDITIONS OF APPROVAL. IF ANY.	¥./		<u> </u>					
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