

OIL CONSERVATION DIVISION

P. O. BOX 2888

SANTA FE, NEW MEXICO 87501

Form O-102

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DISTRIBUTION	
SANTA FE	
FILE	☒
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ For ☒
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CLEAN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM O-101) FOR SUCH PROPOSALS.)

OIL ☐ GAS WELL ☒ CO2 OTHER ☐
Name of Operator
Amoco Production Company
Address of Operator
P. O. Box 68, Hobbs, NM 88240
Location of Well
UNIT LETTER F 1880 FEET FROM THE North LINE AND 1980 FEET FROM
THE West LINE, SECTION 33 TOWNSHIP 19-N RANGE 35-E N.M.P.M.

7. Unit Agreement Name
BDCDGU
8. Firm or Lease Name
BDCDGU 1935
9. Well No.
331
10. Field and Pool, or nearest
Und. Tubb
11. Elevation (Show whether DE, RT, GR, etc.)
4540' GL
12. County
Union

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☒ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
FULL OR ALTER CASING ☐ OTHER ☐ CASING TEST AND CEMENT JOBS ☐
OTHER ☐

13. 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.

Moved in service unit 6-19-81. Attempted to fracture with 75 quality foam. Screened off on 2nd stage sand pumping 4# per gal. 8/12 sand with 1# per gal. concentration in foam. Cleaned out sand to 2335'. Flow tested well thru a separator for 163 hrs. with an average of 1028 MCFD. Shut-in 7-2-81 for BHP build up. Pulled BHP bomb 7-5-81.

0+2-NMOCD, SF 1-Hou 1-Susp 1-MKE 1-Amerada 1-UGI 1-Cities Svc.
1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun Tex.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED [Signature] TITLE Admin. Analyst DATE 8-4-81
APPROVED BY [Signature] TITLE [Signature] DATE 8/5/81
CONDITIONS OF APPROVAL, IF ANY: