

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-059-20125
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Bravo Dome Carbon Dioxide Gas Unit
8. Well No.	2233-261F
9. Pool name or Wildcat	Bravo Dome CO2 Gas Unit
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	4885 GR

SUNDRY 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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> CO2- Gas Well <input type="checkbox"/>	
2. Name of Operator Amoco Production Company	
3. Address of operator P.O. Box 606 Clayton N. Mex 88415	
4. Well Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 26 Township 22N Range 33E NMPM Union County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4885 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Re-enter well and run CIBP to Shut Off Water Prod. <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>

12. 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.

1. Move in, rig up service unit (scheduled for) April 5, 1993.
2. Kill well W/2 % KCL water x necessary additives.
3. Nipple up blow out preventer
4. Release packer and pull out of hole with 2 3/8 tubing and packer.
5. Set cast iron bridge plug at 2458'
6. Run in hole as follows:
 - A. 1 JT 2-3/8 Fiberglass tubing
 - B. 5-1/2 x 2-3/8 Guiberson uni 6 packer. Set packer at 2380'
 - C. Guiberson XL on/off tool w/1.625" ID profile.
 - D. 2-3/8 Fiberglass tubing
 - E. 2-3/8 13% Chrome landing sub.
7. Load annulus with inhibited fluid and test packer to 500 psi for 30 minutes.
8. Swab as necessary to return to production.
9. Flow test well for 3 days with 150 psi back pressure, report daily MCFD x BWPD. Return to shut-in status.

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

SIGNATURE Joy Filkins TITLE Secretary DATE 3/30/93
TYPE OR PRINT NAME Joy Filkins TELEPHONE NO. (713) 556-3613

(This space for State Use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 4-2-93
CONDITIONS OF APPROVAL, IF ANY: