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LAND OFFICE	
OPERATOR	

Form C-105
Revised 10-78

NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. Indicate Type of Lease	
Date ☐	Fee ☐
2. Name of Lessee	

10. TYPE OF WELL	
OIL WELL ☐	GAS WELL ☒ CO2 ☐ DRY ☐ OTHER ☐
11. TYPE OF COMPLETION	
NEW WELL ☒	WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESER. ☐ OTHER ☐

3. Name of Operator
Bravo Dome Carbon Dioxide Gas Unit
4. Name of Lease
Bravo Dome Carbon Dioxide Gas Unit 2234
5. Well No.
071 F

2. Name of Operator	
Amoco Production Company.	
3. Address of Operator	
P. O. Box 68, Hobbs, NM 88240	
4. Location of Well	

6. Field and Pool, or Wildcat
Und. Tubb

UNIT LETTER <u>F</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM	
THE <u>West</u> LINE OF SEC. <u>7</u> TWP. <u>22-N</u> RGE. <u>34-E</u> NMPM	
12. County	
Union	

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKR, RT, GR, etc.)	19. Elev. Casinghead
3-29-81	4-7-81	4-16-81	4905' GL	

20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools
2603'	2559'			0-TD	

24. Producing Interval(s), of this completion - Top, Bottom, Name	
2222-2361' Tubb	
25. Was Directional Survey Made	
No	

26. Type Electric and Other Logs Run	
Comp Neutron Form Density; Dual Laterolog	
27. Was Well Cored	
No	

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB. FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	712'	12-1/4"	500 SX Class H	Circ. 143 SX
5-1/2"	14#	2603'	7-7/8"	600 SX Class H	Circ. 250 SX

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
					2-3/8"	2156'
				PACKER SET		

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2222'-2361' w/1 JSPF		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
		2222'-2361'	4000 gal. 7-1/2% HCL

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
4-12-81		Flowing				Shut-in	
Date of Test	Hours Tested	Choke Size	Pressure For Test Period	Oil - BBL	Gas - MCF	Water - BBL	Gas - Oil Ratio
4-16-81	24	48/64		0	1177	1	
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - BBL	Gas - MCF	Water - BBL	Oil Gravity - API (Corr.)	
160#			0	1177	1		

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed by

35. List of Attachments	
Logs will be mailed upon receipt	

I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED	<u>Bob Davis</u>	TITLE	Admin. Analyst (SG)	DATE	4-24-81
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0+2-NMOCD, SF 1-Hou 1-Susp 1-BD 1-Amerada 1-UGI
1-Cities Svc. 1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun Tex

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured in feet. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 16 through 24 shall be reported for each zone. The form is to be filed in triplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
D. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>1467'</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta <u>1655'</u>	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinberry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb <u>2129'</u>	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. <u>Santa Rosa 1189'</u>	T. Chinle _____	T. _____
T. Penn. _____	T. <u>Cimarron 2110'</u>	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 2222' to 2361' No. 4, from to
No. 2, from to No. 5, from to
No. 3, from to No. 6, from to

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from None to feet.

No. 2, from to feet.

No. 3, from to feet.

No. 4, from to feet.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0'	712'	712'	Surface				
712'	2603'	1891'	Sand, clay, shale x anhydrite				

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.	30-059-20128
5. Indicate Type of Lease	STATE ☐ FEE ☐
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	BRAVO DOME CO2 GAS UNIT
8. Well No.	2234-071F
9. Pool name or Wildcat	BRAVO DOME CO2 GAS UNIT
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	4905 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 ☐ GAS WELL ☐ OTHER ☐ CO2 ☐	2. Name of Operator Amoco Production Company
3. Address of operator P.O. Box 606, CLAYTON, NEW MEXICO 88415	4. Well Location Unit Letter F : 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line Section 7 Township 22N Range 34E NMPM UNION County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4905 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: YEARLY BRADENHEAD TEST (TA WELL) ☐

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.

YEAR	MONTH/DAY	TUBING PRESSURE	CASING PRESSURE	BLEED DOWN TIME
1990	OCT. 28	315#	0	
1991	OCT. 9	310#	0	
1992	SEPT. 18	310#	0	
1993	JUNE 10	310#	0	
1994	JUNE 24	310	0	
1995				
1996				
1997				
1998				
1999				
2000				

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

SIGNATURE M. L. Clay TITLE FIELD TECH. DATE 7-18-94
TYPE OR PRINT NAME M.L. CLAY TELEPHONE NO. (505) 374-3053

(This space for State Use)

APPROVED BY Ry E. E. E. TITLE DISTRICT SUPERVISOR DATE 8-26-94
CONDITIONS OF APPROVAL, IF ANY: