| Submit 3 Copies to Appropriate | State of N Energy, Minerals, and Na | New Mexico atural Resources Department | Form C-103 Revised 1-1-89 |
|--|--|---|---|
| District Office DISTRICT I | OIL CONSERVA | ATION DIVISION | WELL API NO. |
| P.O. Box 1980, Hobbs, NM 88240 | P.O. 3 | Box 2088 | 30-021-20134 |
| <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210 | Santa Fe, New Me | xico 87504-2088 | 5. Indicate Type of Lease STATE FEE |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & Gas Lease No. |
| SUNDRY NOT | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | | 7. Lease Name or Unit Agreement Name |
| Type of Well | r— | | BRAVO DOME CO2 GAS UNIT |
| OR WELL WELL | OTHER | C02 | |
| Name of Operator AMOCO EXPLORATION AND PRODUC | CTION COMPANY | | 8. Well No. 1836-361K |
| 3. Address of Operator 9 | | | 9. Pool name or Wildcat |
| | MEXICO 88410 | | BRAVO DOME CO2 GAS UNIT |
| Well Location Unit Letter K : 1980 | Feet From The Sou | ith Lineard too | P. P. |
| Section 36 | Township 18N | | Feet From The West Line MPM Union County |
| | | ow whether DF, RKB, RT, GR, etc.) | MPM Union County |
| GI I | | 4397 GR | |
| NOTICE OF INTENT | Appropriate Box to Ind | icate Nature of Notice, Re | |
| NOTICE OF INTENTI | <u> </u> | | QUENT REPORT OF: |
| | PLUG AND ABANDON | REMEDIAL WORK | ALTERING CASING |
| LL OR ALTER CASING | CHANGE PLANS | COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB | PLUG AND ABANDONMENT |
| HER: | | OTHER: Yearly Bradenhead Test (T | L A Well) |
| Describe Proposed or Completed Operations SEE RULE 1103. | (Clearly state all pertinent details | , and give pertinent dates, including estimated date of | |
| YEAR MONTH/DAY 1990 6/21 | | G. PRESS. BLEED DOW | N TIME |
| 1990 6/21 1991 6/11 | 390# 390# | 0 | |
| 1992 6/11 | 380# | 0 0 | |
| 1993 5/17 | 380# | 0 | |
| 1994 5/26 | 380# | 0 | |
| 1995 6/7 | 380# | 0 | |
| 1996 5/21 | 380# | 0 | |
| 1997 4/7 | 380# | 0 | 1 |
| 1998 6/9 | 380# | 0 | |
| 1999 | | | 1 1 |
| 2000 | | | |
| | | | |
| | | | |
| | | | |
| | | | 1 |
| by certify that the information above is true and complet TURE M. F. Classe | | | |
| OR PRINT NAME M. L. CLAY | | Field Tech. | DATE 8/26/98 |
| space for State Use) | /) | | TELEPHONE NO. (505) 374-3058 |
| | TITLE _ | DISTRICT SUPERV | 150R DATE 9/16/88 |
| TONS OF APPROVAL, IF ANY: | | A to a to a to a | 7/ -/ -/ -/ |