Submit 3 Copies to Appropriate District Office		ate of New Mexico and Natural Resource	Form C-103 Revised 1-1-89	
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONS	ERVATION DIV P.O. Box 2088	WELL API NO. 30-059-20221	
DISTRICT II P.O. Drawer DD, Artesia, NM 8821		New Mexico 87504-208	5. Indicate Type of Lease STATE FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87	74-10			6. State Oil & Gas Lease No.
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.)				7. Lease Name or Unit Agreement Name
1. Type of Well	GAS WELL	отнея СО2		BRAVO DOME CO2 GAS UNIT
2. Name of Operator  AMOCO EXPLORATION	AND PRODUCTION COMPANY			8. Well No. 1834-331G
3. Address of Operator P.O. Box 608, CLAY	TON, NEW MEXICO 88415			9. Pool name or Wildcat BRAVO DOME CO2 GAS UNIT
4. Well Location Unit Letter G	: 1650 Feet From The	North	Line and 1650	Feet From The East Line
Section 33	Township	,	34E NMI B, RT, GR, etc.) GL	PM Union County
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:				
NOTICE : PERFORM REMEDIAL WORK	UF INTENTIUN TO:  PLUG AND ABANDON	REMED	SUBSEQ ial work	UENT REPORT OF:  ALTERNIG CASING
TEMPORARILY ABANDON	CHANGE PLANS		ENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING OTHER:		CASING	TEST AND CEMENT JOB  Yearly Bradenheed Test (TA)	Neill)
12. Describe Proposed or Completed Operations  (Clearly state all pertinent details, and give pertinent datas, including estimated data of starting any proposed work)  SEE RULE 1103.				
YEAR MONTH 1990 1991 1992 1993	/DAY TBG. PRESS.	CSG. PRESS.	BLEED DOWN	N TIME
1994 6/6 1995 6/7 1996 5/21 1997 4/22	160# 160# 160# 160#	0 0 0		
1998 1999 2000	100%	J		
I hereby certify that the information above	is true and complete to the best of my knowledg	e and belief.  TITLE Field Tech.		DATE 8,5,197
TYPE OR PRINT NAME M. L. C	LIV			TELEPHONE NO. (505) 374-3058
(This space for State Use)  APPROVED BY  CONDITIONS OF APPROVAL, IF ANY:	2 Hum	nte DISTRI	CT SUPERV	ISOR DATE 8-14-97