Submit 3 Copies	State of New Mexico	Form C-103
to Appropriate	Energy, Minerals, and Natural Resources Department	Revised 1-1-89
District Office		
<u>DISTRICT I</u>	OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088	30-059-20249
DISTRICT II	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease
P.O. Drawer DD, Artesia, NM 88210		STATE FEE
DISTRICT III		6. State Oil & Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 874	10	o. State on a Gas Lease No.
CUM	DRY NOTICES AND REPORTS ON WELLS	
1	PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
· ·	NT RESERVOIR. USE "APPLICATION FOR PERMIT"	7. Lease Name or Unit Agreement Name
	(FORM C-101) FOR SUCH PROPOSALS.)	_
1. Type of Well		BRAVO DOME CO2 GAS UNIT
OIL WELL	GAS WELL OTHER CO2	
	olnen GGZ	O AV-II NI
2. Name of Operator	NID DOCULOTION COMPANY	8. Well No.
<b></b>	AND PRODUCTION COMPANY	1834-301G
3. Address of Operator		9. Pool name or Wildcat
P.O. Box 606, CLAYTO	N, NEW MEXICO 88415	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 30	Township 18N Range 34E NM	PM Union County
	10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
	XXXX XXX	
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF	FINTENTION TO: SUBSEQ	UENT REPORT OF:
PERFORM REMEDIAL WORK		
LEKLOWIM VEWIEDIME MOVY	PLUG AND ABANDON X REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB	
OTHER:	OTHER:	
12 Describe Proposed or Completed O	marting (A) I also the control of th	
12 Describe Proposed or Completed Operations (Clearly state all portinent details, and give pertinent dates, including estimated date of starting any proposed work)  SEE RULE 1103.		
MIRU plugging unit. Kill well as necessary with fresh water. Nipple up BOP. Release Guiberson Uni 6 packer. Lay down		
production tubing, packer, tailpipe. Run and set with wireline a CIBP @ 2430'. Pressure test casing to 500 psi. Cap		
CIBP with 50 feet of cement. Run 2-3/8" tubing to just above cement cap on CIBP. Displace casing with 9.5# gelled		
brine water. Pull tubing to 1910'. Pump 13 sacks cement. Displace cement from tubing with 9.5# gelled brine water. Pull		
tubing to a depth plus or minus 30 feet. Fill top of casing with cement. Pull final joint of tubing from the well. Check		
surface casing for pressure. Cut off surface casing head. Weld steel plate on top of casing and install PXA marker. RD		
plugging unit. Remove well panels. Cut service unit anchors off 1' below ground level. Clean location.		
	$\Delta$	
I hereby certify that the information above is:	true and complate to the best of my knowledवृत्रधार्य belief.	
SIGNATURE III	Ly E. Virulau TITE Operations Specialist	DATE 7/23/97
	Орегатила Ороминат	
TYPE OR PRINT NAME BITY E Pri	icnard /	TELEPHONE NO. (505) 374-3050
(This space for State Use)	DISTRICT SUPERVI	500 0/27/07
APPROVED BY	ME DIGINICI SOFERY.	50 ATE 5/0/19/
CONDITIONS OF APPROVAL, IF ANY: /		