State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

93 FE 4 AM 9 15

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

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

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

WELL API NO.	30-059-20262
5. Indicate Type of Lease	STATE ☐ FEE ☐
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
Bravo Dome CO2 Gas Unit

1. Type of Well:
OIL WELL ☐   GAS WELL ☐   OTHER CO2

8. Well No.
2135-291G

2. Name of Operator
Amoco Production Company

9. Pool name or Wildcat
Bravo Dome CO2 Gas Unit

3. Address of Operator
P. O. Box 606, Clayton, NM 88415

4. Well Location
Unit Letter ___G___ : ___1980___ Feet From The __North__ Line and ___1980___ Feet From The ·__East__ Line

Section 29   Township 21   Range 35   NMPM Union   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4661 GR

11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐   PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐   CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER:__Tie well to production__ ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER:_____ ☐

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.

Well no longer temporarily abandoned. Well being tied to gathering system.

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

SIGNATURE _Billy E. Prichard_   TITLE _Field Foreman_   DATE _2/1/93_

TYPE OR PRINT NAME Billy E. Prichard   TELEPHONE NO. 505-374-305

(This space for State Use)

APPROVED BY _____   TITLE DISTRICT SUPERVISOR   DATE _2-18-93_

CONDITIONS OF APPROVAL IF ANY: