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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER- C02	7. Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name Bravo Dome Carbon Dioxide Gas Unit
3. Address of Operator P.O. BOX 68, HOBBS, NEW MEXICO 88240	9. Well No. 1835-281J
4. Location of Well UNIT LETTER <u>J</u> <u>1650</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>28</u> TOWNSHIP <u>18N</u> RANGE <u>35E</u> NMPM.	10. Field and Pool or With Unit Bravo Dome Carbon Dioxide Gas Unit 640-Acre Area
15. Elevation (Show whether DF, RT, GR, etc.) 4605' GL	12. County Union

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER ☒ Completion Work

17. 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.

M154 11-4-85. Drilled out cement to 2531'. Pressure tested casing to 1500 psi-ok. RTH with
Vann guns, tubing and packer. Set packer at 2394'. Perforated 2414-20', 2426-44', 2450-57',
2462-74' with 435PF. MDS4 11-7-85 and flow tested 85 hrs. Last 24 hrs flowed 457 MCFD.
Ran 4-Point test & Shut-in.

0+2-NMOCD,SF 1-J.R. Barnett HOU. Rm.21.156 1-F.J. Nash HOU. Rm.4.206 1-WF,Clayton 1-Susp
1-CMH 1-Amerada Hess 1-Amerigas 1-Cities Service 1-Conoco 1-CO2 in Action 1-Sun
1-Excelsior 1-Tex 1-Exxon 1-WF,Hobbs

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

SIGNED Charles M. Herrington TITLE Admin. Analyst (SG) DATE 11/25/85
Roy Johnson DISTRICT SUPERVISOR
APPROVED BY _____ TITLE _____ DATE 11/25/85
CONDITIONS OF APPROVAL, IF ANY: