Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION

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

WELL API NO. 30-059-20298

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: BDCDGU 2134

1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER CO_2 Well

2. Name of Operator: Amoco Production Company

8. Well No. 291K

3. Address of Operator: P.O. Box 606 Clayton, New Mexico 88415

9. Pool name or Wildcat: Tubb-Bravo Dome 640

4. Well Location
Unit Letter K : 1966 Feet From The West Line and 2006 Feet From The South Line

Section 29 Township T21N Range R34E NMPM Union County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4928

11. 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	☐			CASING TEST AND CEMENT JOB	☒		
OTHER:	☐			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.

MIRU Drlg Unit/ Spud 12¼ Surface hole on 7/12/93. Drill to 695'. Ran 17 jts 8 5/8 24# K55 csg. Set@ 695'. Cmt w/ 450 sx Class A cmt. Circ 20 BBL cmt to surf. Prs. tst csg 500 psi. Drill 7⅞ hole to 2604'. Run 89 jts of 4½ Fiberglass. Set@ 2604'. Cmt w/ 550 sx Class A cmt. Circ. Well Shut In. WOCU x PLC

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 7/27/93

TYPE OR PRINT NAME Billy E. Prichard TELEPHONE NO. 505 374 3053

(This space for State Use)

APPROVED BY Ray E. Johnson TITLE DISTRICT SUPERVISOR DATE 7-27-93

CONDITIONS OF APPROVAL, IF ANY: