

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.

30-059-20378

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

BRAVO DOME CO2 GAS UNIT

8. Well No.

1935-302E

9. Pool name or Wildcat

BRAVO DOME CO2 GAS UNIT

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. Type of Well

OIL WELL ☐

GAS
WELL ☐

OTHER

CO2

2. Name of Operator

AMOCO PRODUCTION COMPANY

3. Address of Operator

P.O. Box 303, AMISTAD, NEW MEXICO 88410

4. Well Location

Unit Letter E : 2408 Feet From The North Line and 722 Feet From The West Line
Section 30 Township 19N Range 35E NMPM Union County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4684' GL

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: ☐

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 11113.

5/11/98

Move in rig up rotary tools. Drill 12-1/4" hole to 731'. Run 8-5/8" 23# WC-55 casing. Set at 731'. Cement with 285 sacks Prem. Plus cement. Circulate 75 sacks to pit. Test 8-5/8" to 500 psi 10 min. Held OK. Drill 7-7/8" hole 731' - 2355'. Run 5.5" 15.5# and 14.00# casing. Set at 2347'. Cement with 235 sacks Midcon Prem. Plus cement. Circulate 35 sacks to pit. Shut in. Wait on service unit. MORT

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

SIGNATURE

D. J. Holcomb

TITLE

Field Team Leader

DATE

5/15/98

TYPE OR PRINT NAME

D. J. Holcomb

TELEPHONE NO.

(505) 374-3010

(This space for State Use)

APPROVED BY

R. E. Johnson

TITLE

DISTRICT SUPERVISOR

DATE

5/22/98

CONDITIONS OF APPROVAL, IF ANY