

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1

5a. Indicate Type of Lease
State ☐ For ☐
5. State Oil & Gas Lease No.

7. Unit Agreement Name
BDCDGU
8. Farm or Lease Name
BDCDGU 2033

9. Well No.
341

10. Field and Pool, or Wildcat
Und. Tubh

12. County
Harding

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 ☒ CO2 OTHER ☐
2. Name of Operator
3. Address of Operator
Amoco Production Company P.O. Box 68, Hobbs, New Mexico 88240
4. Location of Well
UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM
THE West LINE, SECTION 34 TOWNSHIP 20-N RANGE 33-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
4893.7 G1

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

PERFORM REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐
PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Propose to repair tubing/ packer leak as follows:

Move in service unit and kill well with 2% KCL water. Pressure test tubing to 1000 PSI for 30 minutes. If tubing leaks release packer and pull tubing one joint at a time testing for leaks. Replace bad joints. If tubing does not leak pump annular volume of 2% kcl water down backside and reset packer. Finish loading backside. Pressure test backside for leaks. Return well to production.

0+2- NMOCD, SF 1-HOU 1-Susp !-CLF 1-Amerada 1-UGI 1-Cities Service
1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun Tex.

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

SIGNED Mark L. J. J. J.

TITLE Asst. Admin. Analyst

DATE 11-11-1982

APPROVED BY Carl W. J. J.

TITLE DISTRICT SUPERVISOR

DATE 11/17/82

CONDITIONS OF APPROVAL, IF ANY: