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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
L-5852

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-103) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ CO ₂ Supply	7. Unit Agreement Name
2. Name of Operator Cities Service Company	8. Farm or Lease Name State DM
3. Address of Operator P.O. Box 1919 - Midland, Texas 79702	9. Well No. 1
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>18N</u> RANGE <u>30E</u> NMPM.	10. Field and Pool, or Wildcat Bravo Dome Area
15. Elevation (Show whether DF, RT, GR, etc.) 4475' GR	12. County Harding

16. 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 ☐

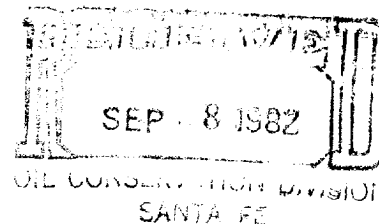
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐	OTHER <u>Continued Shut-in Status</u> ☒

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.

T.D. 2252' Sand & Shale, PBTD 2196'. This well was completed as a shut-in CO₂ supply well on 4-26-81 and remains shut-in due to the lack of pipeline facilities in the area.

AUTHORIZATION FOR MAINTENANCE IN SHUT-IN OR
TEMPORARY ABANDONMENT STATUS EXPIRES 9/9/83



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

SIGNED <u>Elmer Stutz</u>	TITLE <u>Region Opr. Mgr. - Prod.</u>	DATE <u>8-26-82</u>
APPROVED BY <u>Carl Kling</u>	TITLE <u>DISTRICT SUPERVISOR</u>	DATE <u>9-9-82</u>
CONDITIONS OF APPROVAL, IF ANY:		