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 ☐ 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 ☒ CO2 OTHER-
7. Unit Agreement Name: BDCDGU
2. Name of Operator: Amoco Production Company
8. Farm or Lease Name: BDCDGU
3. Address of Operator: P. O. Box 68, Hobbs, New Mexico 88240
9. Well No.: 1933 221A
4. Location of Well: UNIT LETTER A, 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 22, TOWNSHIP 19-N, RANGE 33-E, NMPM.
10. Field and Pool, or Wildcat: Und. Tubb
15. Elevation (Show whether DF, RT, GR, etc.): 4924' GL
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			☐

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SANTA FE

SUBSEQUENT REPORT OF:

REMEDIAL WORK	☒	ALTERING CASING	☐
COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
CASING TEST AND CEMENT JOB	☐		
OTHER			☐

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.

Moved in completion unit 10-22-83. Perforated 2359'-92', 2396'-2409', 2411'-24', 2426'-31', and 2434'-43' with 2 JSPF. Acidized with 2000 gal 7-1/2% HCL acid. Flow tested thru a separator at an average of 1000 MCFD in 165 hours. Shut in well 11-3-83.

0+2-NMOCD,SF 1-HOU R. E. Ogden RM 21.150 1-SUSP 1-PJS 1-Amerada 1-Amerigas
1-Cities Service 1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun. Tex. 1-Exxon
1-Jim Russell, Clayton 1-F. J. Nash, HOU RM 4.206

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

SIGNED Patty J. Senna TITLE Assist. Admin. Analyst DATE 11-16-83

APPROVED BY _____ TITLE _____ DATE 11-18-83

CONDITIONS OF APPROVAL, IF ANY: