

OIL CONSERVATION DIVISION  
P. O. BOX 2688  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State  For

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.  
(SEE APPLICATION FOR PERMIT - FORM C-1011 FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  CO<sub>2</sub> OTHER

2. Name of Operator  
Amoco Production Company

Bravo Dome Carbon Dioxide Gas Unit  
Bravo Dome Carbon Dioxide Gas Unit 1935  
9. Well No. 031 ~~0~~

3. Address of Operator  
P. O. Box 68, Hobbs, NM 88240

4. Location of Well  
UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM  
East LINE, SECTION 3 TOWNSHIP 19-N RANGE 35-E N.M.P.M.

10. Fluid and Pool, or Without  
Und. Tubb

15. Elevation (Show whether DF, RT, GR, etc.)  
4585 GL

12. County  
Union

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: Name Change <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Name changed from E. Roberts No. 1  
to Bravo Dome Carbon Dioxide Gas Unit 1935 Well No. 031 ~~0~~

SANTA FE

0+2 NMOC-D-SF 1-Hou 1-Susp 1-BD

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

SIGNED: Bob Laws TITLE: Admin. Analyst DATE: 4-13-81

APPROVED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: