

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-059-20107

5. Indicate Type of LeaseSTATE ☐FEE ☐**6. 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)

7. Lease Name or Unit Agreement Name

BRAVO DOME CO2 GAS UNIT

1. Type of WellOIL
WELL ☐GAS
WELL ☐

OTHER

CO2

2. Name of Operator

AMOCO PRODUCTION COMPANY

8. Well No.

2035-301G

3. Address of Operator

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

9. Pool name or Wildcat

BRAVO DOME CO2 GAS UNIT

4. Well LocationUnit Letter G : 1980 Feet From The South Line and 1980 Feet From The East Line
Section 30 Township 20N Range 35E NMPM Union County**10. Elevation (Show whether DF, RKB, RT, GR, etc.)**4965 GR**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 1103.

MIRUSU, kill well as necessary, NUBOP, release packer, lay down production tubing and packer, run workstring to 2,337 feet, spot 17 sacks of cement, pull workstring, WOC, run workstring, tag cement, cement should be above 2,206 feet, pressure test casing to 500 psi, displace casing with mud laden fluid, pull workstring to 1,836 feet, spot 11 sacks of cement, pull workstring to 30 feet and fill casing with cement. NDBOP, cut off wellhead, install PXA marker, RDMOSU, cut off well anchors and clean location.

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

SIGNATURE

TITLE Field Foreman

DATE 8-18-99

TYPE OR PRINT NAME

Darryl J. Holcomb

TELEPHONE NO (505) 374-3010

This space for State Use

APPROVED BY

TITLE

DISTRICT SUPERVISOR

DATE

8/23/99

CONDITIONS OF APPROVAL IF ANY