

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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

OIL CONSERVATION DIVISION
SANTA FE

MAY 19 1981

Form C-103
Revised 10-1-

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 ☒ C02 OTHER-	7. Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
2. Name of Operator Amoco Production Company	8. Form or Lease Name Bravo Dome Carbon Dioxide Gas Unit 1834
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 141
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM <u>East</u> LINE, SECTION <u>14</u> TOWNSHIP <u>18-N</u> RANGE <u>34-E</u> NMPM.	10. Flood and Pool, or Wildcat Und. Tubb
15. Elevation (Show whether DF, RT, GR, etc.) 4766' GL	12. County Union

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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 4-27-81. Perforated casing at 2500'-08', 2521'-31', 2538'-47', 2555'-67' with 2 JSPF. Acidized with 2050 gal. 7-1/2% HCL acid. Flow tested thru a separator for 48 hrs. at an average of 1170 MCFD. Shut well in 5-3-81.

0+2-NMOCD, SF 1-Hou 1-Susp 1-MKE 1-Amerada 1-UGI 1-Cities Svc.
1-Conoco 1-C02 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 [Signature] TITLE Admin. Analyst DATE 5-7-81

APPROVED BY [Signature] TITLE ADMINISTRATIVE COORDINATOR DATE 5/21/81

CONDITIONS OF APPROVAL, IF ANY: