

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**

P.O. Box 2088

WELL API NO.  
30-059-20247

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

5. Indicate Type of Lease  
STATE  FEE

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

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 Well  
OIL WELL  GAS WELL  OTHER CO2

8. Well No.  
1834-181G

2. Name of Operator  
AMOCO PRODUCTION COMPANY

9. Pool name or Wildcat  
BRAVO DOME CO2 GAS UNIT

3. Address of Operator  
P.O. Box 303, AMISTAD, NEW MEXICO 88410

4. Well Location  
Unit Letter G : 1650 Feet From The NORTH Line and 1980 Feet From The EAST Line  
Section 18 Township 18N Range 34E NMPM UNION County

10. Elevation (Show whether DF, FKB, RT, GR, etc.)  
4765 GL

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.

12/1/97

Spot 35 sacks of Class C cement @ 2542'.

12/2/97

Tagged TOC @ 2400'  
Circulate well with mud laden fluid  
Pressure test 7" casing to 500 psi.  
Spot 20 sacks of Class C cement @ 1953'-1837'  
Spot 5 sacks of Class C cement @ 30'-3'  
Cut off wellhead and anchors 3' below ground level  
Cap well with steel plate.  
Install dry hole marker. Cover pit and cellar.  
Clean location.

*Inspected 1/7/98 -OK Rg*

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

SIGNATURE Billy E. Krueber TITLE Operations Specialist DATE 12/3/97

TYPE OR PRINT NAME B. E. PRICHARD TELEPHONE NO. (505) 374-3053

(This space for State Use)  
APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 1/12/98

CONDITIONS OF APPROVAL, IF ANY: