Post-it™ brand
Fax Transmittal Memo 7672

To ROY JOHNSON
Company NMOCD
Location SANTA FE NM
Fax # Telephone #

Comments Please notify Mr. Johnson upon receipt. Thank you.

No. of Pages Today's Date Time

From MARK RANDOLPH
Company AMOCO PROD.
Location HOUSTON Dept. Charge
Fax # Telephone #

Original Disposition: ☐ Destroy ☐ Return ☐ Call for pickup

ILLEGIBLE

Submit 3 Copies to Appropriate District Office

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O.Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO.
30-059-20307

5. Indicate Type of Lease STATE ☐ 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 Carbon Dioxide Gas Unit - 2233

1. Type of Well
OIL WELL ☐ GAS WELL ☒ OTHER CO2

2. Name of Operator
Amoco Production Company

8. Well No.
311J

3. Address of operator
P.O. Box 606 Clayton N. Mex. 88415

9. Pool name or Wildcat
Tubb

4. Well Location
Unit Letter J : 1982 Feet From The East Line and 1988 Feet From The South Line

Section 31 Township T 22 N Range R 33 E NMPM Union County

10. Elevation (*Show whether DF, RKB, RT, GR, etc.*)
4984

11. 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 OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: Drilling, Casing and Cementing Well ☒	

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.

Moved in drilling unit and spud a 12-1/4 surface hole on 5/31/93. Drilled to 681. Ran 17 joints of 8.625", 24#, K-55 surface casing and set at 681. Cemented with 400 sacks class A with additives. Circulated 163 sacks to the surface. Pressure tested casing to 600 psi. Drilled a 7-7/8" hole to 2328. Ran 79 joints of 4.5" fiberglass production casing and set at 2328. Cemented with 575 sacks of class A with additives. Circulated 145 sacks or cement to the surface. Released drilling rig 6/3/93. Moved in, rigged up service unit 7/7/93. Tested casing to 600 psi and held ok. Drilled well to 2509'. Blew well clean. Flow tested well. Nipped down BOP and shut well in. Rigged down service unit 7/11/93.

827
5741

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

SIGNATURE Joy Fikins TITLE Administrative Secretary DATE 7-13-93

TYPE OR PRINT NAME Joy Fikins TELEPHONE NO. (713) 556-3613

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Submit to Appropriate District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088

ILLEGIBLE

Form C-105
Revised 1-1-89

WELL API NO.
30-059-20307

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well: OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER CO_2 Well

7. Lease Name or Unit Agreement Name
BDCDGU 2233

b. Type of Completion: NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER

2. Name of Operator
Amoco Production Company

8. Well No.
311J

3. Address of Operator
P.O. Box 606 Clayton, New Mexico 88415

9. Pool name or Wildcat
Bravo Dome 640

4. Well Location
Unit Letter J : 1982 Feet From The East Line and 1988 Feet From The South Line

Section 31 Township T22N Range R33E NMPM Union County

10. Date Spudded	11. Date T.D. Reached	12. Date Compl. (Ready to Prod.)	13. Elevations (DF & RKB, RT, GR, etc.)	14. Elev. Casinghead
5/31/93	6/3/93	7/19/93	4964	4964

15. Total Depth	16. Plug Back T.D.	17. If Multiple Compl. How Many Zones?	18. Intervals Drilled By	Rotary Tools	Cable Tools
2509	2509	N/A		0-TD	

19. Producing Interval(s), of this completion - Top, Bottom, Name
2328-2509 Open hole

20. Was Directional Survey Made
Yes

21. Type Electric and Other Logs Run

22. Was Well Cored
N/A

23. **CASING RECORD** (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	681	12 1/4	400sx	Circ
4 1/2	Fiberglass	2328	7 7/8	575sx	Circ

24. **LINER RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

25. **TUBING RECORD**

SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number)
2328-2509 Open hole

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

28. **PRODUCTION**

Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)	Well Status (Prod. or Shut-in)
7/19/93	Flowing	Prod.

Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
7/11/93	3hr	2"		—	1900	0	—

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)
—	120psi		—	1900		—

29. Disposition of Gas (Sold, used for fuel, vented, etc.)
Sold

Test Witnessed By

30. List Attachments
Logs Previously Sent

31. *I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief*

Signature Billy E. Prichard Printed Name Billy E. Prichard Title Field Foreman Date 7/15/93

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Amoco Production Company — Well API No.: 30-059-20307

Address: P.O. Box 606 Clayton, New Mexico 88415

Reason(s) for Filing (Check proper box)
New Well [X] — Other [X]: CO_2
Recompletion [ ] — Change in Transporter of: Oil [ ] Dry Gas [ ]
Change in Operator [ ] — Casinghead Gas [ ] Condensate [ ]

If change of operator give name and address of previous operator: ILLEGIBLE

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
BDCDGU 2233	311	Bravo Dome - Tubb		

Location
Unit Letter J : 1982 Feet From The East Line and 1988 Feet From The South Line
Section 31 Township T22N Range R33E NMPM Union County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ] — Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [X] — Address (Give address to which approved copy of this form is to be sent)
Amoco Prod. Co — P.O. Box 606 Clayton, New Mexico 88415

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
N/A					yes	7/ 193

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
5/31/93	7/19/93	2509	2509

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4964	Tubb	2328	N/A

Perforations	Depth Casing Shoe
2328-2509 Open hole	2328

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8	681	400sx
7 7/8	4 1/2	2328	

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas- MCF**

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1,900	3 hr	N/A	N/A
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
Pitot	N/A	170 psi	2"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Billy E. Prichard
Signature
Billy E. Prichard Field Foreman
Printed Name — Title
7/15/93 — 5053743053
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____

By _____

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.