

District I  
 PO Box 1980, Hobbs, NM 88241-1980  
 District II  
 PO Drawer DD, Artesia, NM 88211-0719  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
 PO Box 2088  
 Santa Fe, NM 87504-2088

Form C-101  
 Revised February 21, 1994  
 Instructions on back  
 Submit to Appropriate District Office  
 State Lease - 6 Copies  
 Fee Lease - 5 Copies

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

|  |  |                            |
|--|--|----------------------------|
| Operator Name and Address.<br>AMOCO PRODUCTION COMPANY<br>P. O. BOX 606<br>CLAYTON, NEW MEXICO 88415 |  | OGRID Number<br>000778     |
| Property Name<br>BDCDGU <del>2035</del> 2135   |  | API Number<br>30-059-20318 |
| Property Code<br>000335  |  | Well No.<br>181            |

Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| K             | 18      | 21N      | 35E   |         | 2013'         | SOUTH            | 1986'         | WEST           | UNION  |

Proposed Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
|               |         |          |       |         |               |                  |               |                |        |

|  |                 |
|--|-----------------|
| Proposed Pool 1<br>BRAVO DOME CARBON DIOXIDE GAS (640) | Proposed Pool 2 |
|--|-----------------|

|                     |                        |                   |                      |                                |
|---------------------|------------------------|-------------------|----------------------|--------------------------------|
| Work Type Code<br>N | Well Type Code<br>C    | Cable/Rotary<br>R | Lease Type Code<br>S | Ground Level Elevation<br>4783 |
| Multiple<br>NO      | Proposed Depth<br>2320 | Formation<br>TUBB | Contractor<br>SITTON | Spud Date<br>JULY 1, 1995      |

Proposed Casing and Cement Program

| Hole Size | Casing Size | Casing weight/foot | Setting Depth | Sacks of Cement | Estimated TOC |
|-----------|-------------|--------------------|---------------|-----------------|---------------|
| 12.250"   | 8.625"      | 24#/FT STEEL       | 700 FT.       | 450 SACKS       | SURFACE       |
| 7.875"    | 5.50"       | 5.91#/FT FGLASS    | 2400 FT.      | 270 SACKS       | SURFACE       |
|           |             | 15.50#/FT STEEL    |               |                 |               |

Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

MUD PROGRAM 0-700' FRESH WATER/NATIVE MUD  
 700'-2400' FRESH WATER/STARCH/GEL

BOP PROGRAM ATTACHED

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

Signature: *Linda Oates*  
 Printed name: LINDA OATES

Title: SR. ADMINISTRATIVE ASSISTANT

Date: JUNE 1, 1995  
 Phone: 713/366-4510

|  |                            |
|--|----------------------------|
| OIL CONSERVATION DIVISION                                    |                            |
| Approved by: <i>[Signature]</i>                              | Title: DISTRICT SUPERVISOR |
| Approval Date: 6/6/95  | Expiration Date: 6/6/96    |
| Conditions of Approval:<br>Attached <input type="checkbox"/> |                            |

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AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                      |  |   |  |   |                                    |
|--------------------------------------|--|---|--|---|------------------------------------|
| <sup>1</sup> API Number              |  | <sup>2</sup> Pool Code<br>96010                           |  | <sup>3</sup> Pool Name<br>BRAVO DOME CARBON DIOXIDE GAS (640) |                                    |
| <sup>4</sup> Property Code<br>000335 |  | <sup>5</sup> Property Name<br>BDCDGU <del>2234</del> 2135 |  |   | <sup>6</sup> Well Number<br>181    |
| <sup>7</sup> OGRID No.<br>000778     |  | <sup>8</sup> Operator Name<br>AMOCO PRODUCTION COMPANY    |  |   | <sup>9</sup> Elevation<br>4783.30' |

<sup>10</sup> Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn. | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|----------|---------------|------------------|---------------|----------------|--------|
| K             | 18      | 21N      | 35E   |          | 2013'         | SOUTH            | 1986'         | WEST           | UNION  |

<sup>11</sup> Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn. | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|----------|---------------|------------------|---------------|----------------|--------|
|               |         |          |       |          |               |                  |               |                |        |

|                                      |                               |                                       |                         |
|--------------------------------------|-------------------------------|---------------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>640 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code<br>U | <sup>15</sup> Order No. |
|--------------------------------------|-------------------------------|---------------------------------------|-------------------------|

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

|                   |  |
|-------------------|--|
| <sup>16</sup><br> | <sup>17</sup> OPERATOR CERTIFICATION<br>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.<br><br><i>Linda Oates</i><br>Signature<br>LINDA OATES<br>Printed Name<br>Sr. Administrative Assistant<br>Title<br>June 1, 1995<br>Date   |
|                   | <sup>18</sup> SURVEYOR CERTIFICATION<br>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.<br><br>February 15, 1995<br>Date of Survey<br>Signature and Seal of Professional Surveyor<br><br><i>Larry A. Fisher</i><br>LARRY A. FISHER<br>Certificate Number 11013 |

