

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

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

WELL API NO. 30-021-20095
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
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.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> CO2 OTHER	7. Lease Name or Unit Agreement Name Bravo Dome Carbon Dioxide Gas Unit
2. Name of Operator Amoco Production Company	8. Well No. 2031 261G
3. Address of Operator P. O. Box 3092; Houston, TX 77253	9. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas Unit
4. Well Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>26</u> Township <u>T20N</u> Range <u>R31E</u> <u>NMPM</u> <u>HARDING</u> County	10. Elevation (Show whether DP, RKB, RT, GR, etc.) <u>4701</u>

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Yearly Bradenhead Test (TA Well)</u> <input checked="" type="checkbox"/>	

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.

YEAR	MONTH/DAY	TUBING PRESSURE	CASING PRESSURE	BLEED DOWN TIME
1990	06/29	490#	0	
1991				
1992				
1993				
1994				
1995				
1996				
1997				
1998				
1999				
2000				

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

SIGNATURE C. M. Long TITLE SR ADMINISTRATIVE ANALYST DATE 12/13/90
 TYPE OR PRINT NAME C. M. LONG TELEPHONE NO. 713-556-3216

(This space for State Use)

APPROVED BY B. J. Johnson TITLE DISTRICT SUPERVISOR DATE 1-3-91

CONDITIONS OF APPROVAL, IF ANY:

THIS NOTICE OF INTENTION TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR OR TO ALTER THE STATUS EXPIRES 6-29-91

BDCDGU WELL NO.2031-261 G
STATE KC NO.1 API NO.30-021-20095
1980'FNL X 1980'FEL, SEC.26,T-20-N,R-31-E
HARDING COUNTY NEW,MEXICO

GL 4701 FT
RDB 4714 FT
UPDATED 09/28/90
FLAC.NO.601022

12.25 IN HOLE

BOTTOM OF 8.625 IN OD. 24.0 LB/FT
Ø 726, CMT W/500 SKS
CIRC.208 SKS
K-55, ST&C

MODEL GUIB. UNI. VI. 2171 PACKER
BOTTOM OF 2.375 IN OD TBG AT 2171
J-55 BART

PERF 2214-2220
PERF 2224-2234
PERF 2236-2247
PERF 2250-2258
PERF 2276-2287
PERF 2292-2295
PERF 2299-2305
WITH LIGHT

PBTD AT 2324 FT

7.875 IN HOLE

TOTAL DEPTH 2273 FT

BOTTOM OF 5.50 IN OD. 14.0 LB/FT
Ø 2302, CMT W/700 SKS
CIRC.100 SKS
K-55, ST&C