

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION

Form C-103
Revised 1-1-89

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

RECEIVED
91 JUL 8 PM
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-021-20042

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

1. Type of Well:
OIL WELL GAS WELL CO2 OTHER

8. Well No.
1831-341A

2. Name of Operator
Amoco Production Company

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 A .990 Feet From The NORTH Line and 990 Feet From The EAST Line
Section 34 Township T18N Range R31E NMPM HARDING County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)
4381.57 GR

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: Yearly Bradenhead Test (TA 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.

YEAR	MONTH/DAY	TUBING PRESSURE	CASING PRESSURE	BLEED DOWN TIME
1990	JUNE 21	490#	0	
1991	JUNE 17	500#	0	
1992				
1993				
1994				
1995				
1996				
1997				
1998				
1999				
2000				

AUTHORIZATION FOR MAINTENANCE IN SHUT-IN OR
TEMPORARY ABANDONMENT STATUS EXPIRES 6-17-92

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

SIGNATURE Mary Corley TITLE STAFF ADMIN ANALYST DATE 7/1/91
TYPE OR PRINT NAME MARY CORLEY TELEPHONE NO. 713-556-4491

(This space for State Use)
APPROVED BY Ry Johnson TITLE DISTRICT SUPERVISOR DATE 7-10-91
CONDITIONS OF APPROVAL, IF ANY:

BDCDGU WELL NO. 1831-341 A
MC/CARTY NO.1 API NO.30-021-20042
1333'FNL X 1321'FEL,SEC.34,T,18N,R-31-E
HARDING COUNTY,NEW MEXICO

