

DATE OF NOTICE	
JUSTIFIED STATE	
SANCTA FE	
FILE	
U.S. DIST.	
LAND OFFICE	
OPERATOR	

10. Indicate Type of Notice
State Fed
11. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL UP TO SURFACE OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION OF A PERMIT OR OTHER CREDIT FOR SUCH PROPOSALS.

1. Name of Operator
Oil Well Gas Well CO₂ OTHER _____
Amoco Production Company

2. Address of Operator
Bravo Dome Carbon Dioxide Gas Unit 2035

3. Well No.
321

4. Location of Well
UNIT LETTER F 1980 FEET FROM THE North LINE AND 1980 FEET FROM
West 32 TOWNSHIP 20-N RANGE 35-E

5. Elevation (Show whether DF, RT, GR, etc.)
4705 GL

6. County
Union

16. 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 OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
FULL OR ALTER CASING <input type="checkbox"/>	OTHER Name Change <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Description of Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Name changed from Earle No. 1
to Bravo Dome Carbon Dioxide Gas Unit 2035 Well No. 321

0+2 NMOCD-SF 1-Hou 1-Susp 1-BD

18. I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPROVED BY: Bob Laws TITLE: Admin. Analyst DATE: 4-13-81

APPROVED BY: _____ TITLE: _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY: