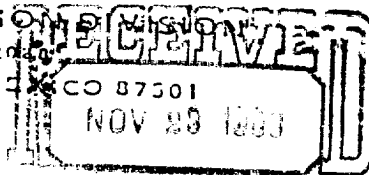


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P.O. BOX 2020
SANTA FE, NEW MEXICO 87501



Form C-103
Revised 10-1-

NO. OF SERVICE REQUESTS	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATION	

3a. Indicate Type of Lease
State ☐ Fee ☒
3. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REPER OR PLUG WELLS TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL OR TO REPER OR PLUG WELLS FOR SUCH PROPOSALS.

OIL WELL ☐	GAS WELL ☒ CO2	OTHER ☐	7. Unit Agreement Name BDCDGU
Name of Operator AMOCO PRODUCTION COMPANY			8. Farm or Lease Name BDCDGU
Address of Operator P.O. BOX 68, HOBBS, NEW MEXICO 88240			9. Unit No. 1834 151G
Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>15</u> TOWNSHIP <u>18-N</u> RANGE <u>34-E</u> N.M.P.M.			10. Field and Pool, or Mineral UND. TUBB
15. Elevation (Show whether OF, RT, CR, etc.) 4790' GL			12. County Union

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

REPAIR REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
REPAIR OR ALTER CASING ☐	OTHER ☐ Request Extension	CASING TEST AND CEMENT JOB ☐	OTHER ☐

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

We request a 90 day extension to our approved Application For Permit to Drill on the subject well. It was approved 8-31-83 and expires 11-29-83.

0+2-NMOCD,SF 1-HOU R. E. Ogden RM 21.150 1-SUSP 1-PJS 1-Amerada 1-Amerigas
1-Cities Service 1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun. Tex. 1-Exxon
1-Jim Russell, Clayton 1-F. J. Nash, HOU RM 4.206

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

By Peter J. Serna TITLE Assist. Admin. Analyst DATE 11-21-83

APPROVED BY _____ TITLE _____ DATE 2/27/84

CONDITIONS OF APPROVAL, IF ANY: