

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☒

5. 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name -----
2. Name of Operator BRAVO ENERGY, INC.	8. Farm or Lease Name Dauron
3. Address of Operator P. O. Box 2160, Hobbs, N. M. 88241	9. Well No. 2
4. Location of Well UNIT LETTER <u>J</u> <u>3535</u> FEET FROM THE <u>North</u> LINE AND <u>1980'</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Wantz-Abo
15. Elevation (Show whether DF, RT, GR, etc.) DF 3561'	12. County Lea

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 OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

Ran 38 jts. of 24# and 32# 8-5/8 J-55 casing set @ 1601'.
Cemented with 325 sx of pacesetter plus 200 sx of Class "C" neat.
Full circulation throughout job. Circulated cement to surface.
W. O. C. 12 hrs. Tested casing with 500 PSI. Held OK

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

SIGNED Ann K. Headstream TITLE Production Supervisor DATE 12-15-86

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

DEC 17 1986

RECEIVED
DEC 16 1966
ODD
Heads Office

RECEIVED
DEC 16 1966
Heads Office