

CISE  
BT  
GT-2  
DP

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

## OIL CONSERVATION DIVISION

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

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

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Bridge Oil Company, L.P. ✓		Well API No.
Address 12404 Park Central Dr., Ste. 400, Dallas, TX 75251		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	RECEIVED
If change of operator give name and address of previous operator		

MAY 19 1992

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 12 Com	Well No. 1	Pool Name, Including Formation DE: Borden Flat Strawn	Kind of Lease State, Federal or Fee	Lease No. NM-0555283
Location				
Unit Letter A	: 660	Feet From The North	Line and 660	Feet From The East
Section 12	Township 21S	Range 26E	NMPM,	Eddy
County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corp.	P.O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Gas Co. of New Mexico El Paso Natural Gas Co.	1st International Bldg, Dallas, TX 75270 P.O. Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 12	Twp. 21S	Rge. 26E	Is gas actually connected? Yes	When? Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

### IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X				X		X
Date Spudded 7-12-74	Date Compl. Ready to Prod. 4-11-92		Total Depth 11,400		P.B.T.D. 10,175			
Elevations (DF, RKB, RT, GR, etc.) 3187.5 GR	Name of Producing Formation Strawn		Top Oil/Gas Pay 9894- 10,007		Tubing Depth 9825			
Perforations 10,007-10,011 and 10,092-10,094 w/ 4 SPF					Depth Casing Shoe 11,400			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		550		600			
12-1/4	9-5/8		2600		2025			
7-7/8	5-1/2		11400		1450			
5-1/2	2-3/8 tbg		9825		None			

### V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

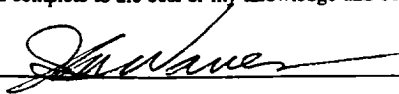
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

### GAS WELL

Actual Prod. Test - MCF/D 1110	Length of Test 4 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate NA
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 3340	Casing Pressure (Shut-in) -0-	Choke Size Open

### VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature   
J.M. Warren, Regulatory Manager  
Printed Name  
5-21-92 (214) 788-3300  
Date  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved JUN 16 1992

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

### INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.