

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

MEXICO OIL CONSERVATION COMMISSIO.

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
OG 3920

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	none
3. Address of Operator	8. Farm or Lease Name
Sage Energy Company	Bridwell State
4. Location of Well	9. Well No.
P. O. Drawer 3068, Midland, Texas 79702	1
UNIT LETTER G, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 1 TOWNSHIP 9S RANGE 32E NMPM.	10. Field and Pool, or Wildcat
	Bar "U" from <i>from</i>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4404.1' GL	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 checked="" 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 JOB <input 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.

Set Cast Iron Bridge Plug and 35' cement at 9000'±
Cut 5½" pull as low as possible
100' plug 1/2 in and 1/2 out 5½" stub.
100' at top of San Andres 4330'
100' at shoe of 8 5/8" 1/2 in and 1/2 out 3650'
Cut 8 5/8" as low as possible and pull (1200'±)
100' at 8 5/8" stub.
100' at 11 3/4" shoe 1/2 in and 1/2 out 305'
10 sxs surface and marker

THIS COMMISSION MUST BE NOTIFIED 24 HOURS BEFORE THE BEGINNING OF ANY WORKING FOR THE OIL FIELD.

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

SIGNED Francisco Holyard TITLE Production Clerk DATE 1-11-85
ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT I SUPERVISOR TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JAN 15 1985

NO. OF COPIES RECEIVED

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

Operator
Sage Energy Company

Address
P. O. Drawer 3068, Midland, Texas 79702

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change of company name only - from Rial Oil Company
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Bridwell State	Well No. 1	Pool Name, including Formation Bar U Penn	Kind of Lease State, Federal or Fee State	Lease No. OG-3920
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>north</u> Line and <u>1980</u> Feet From The <u>east</u> Line of Section <u>1</u> Township <u>9-S</u> Range <u>32-E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 300, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 1	Twp. 9-S	Pge. 32-E	Is gas actually connected? yes	When 8/16/68

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Dist. Reservoir
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tanks	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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

Jerry Sexton
(Signature)
Production Clerk
(Title)
6/27/80
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 3 1980, 19____

BY Orig. Signed by
Jerry Sexton
TITLE Dist 1, Supv.

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.