

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Bridge Oil Company, L.P.	Well API No. 30-025-30939
Address 12377 Merit Drive, Suite 1600, Dallas, Texas 75251	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) New Well <input type="checkbox"/> Change in Transporter of: Notification of gas connection Recompletion <input 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"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kim Harris	Well No. 1	Pool Name, including Formation Wildcat Wolfcamp	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 990 Feet From The North Line and 2310 Feet From The East Line Section 12 Township 16S Range 36E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Oil Company /Div. of Koch Ind., Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1558, Breckenridge, TX 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petr. Co./Div. of Chevron USA Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1150, Midland, TX 79702					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 12	Twp. 16S	Rge. 36E	Is gas actually connected? Yes	When? 11-14-90

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8-29-90	Date Compl. Ready to Prod. 10-19-90		Total Depth 11,800'		P.B.T.D. 10,704'			
Elevations (DF, RKB, RT, GR, etc.) 3868 GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,540'		Tubing Depth 10,700'			
Perforations 10,590'-10,600'; 2 SPF; 21 Holes					Depth Casing Shoe 10,814'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" 61# J-55		420'		450sx Class C			
11"	8-5/8" S80 & J-55		4504'		1450sx Poz C & 280 sx Class C neat			
7-7/8"	5-1/2" 17# N-8		10,814'		300sx Class H			

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 10-19-90	Date of Test 10-22-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 825 psi	Casing Pressure 0	Choke Size 12/64"
Actual Prod. During Test	Oil - Bbls. 185	Water - Bbls. 0	Gas- MCF 330

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

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. Michael Warren
Printed Name J. Michael Warren, Reg. Analyst Title
Date November 19, 1990 (214) 788-3363 Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 26 1990

By ORIGINAL SIGNED BY JERRY SEXTON

Title _____

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.

RECEIVED

NOV 23 1990

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