Subr.ut 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240	propriate District Office Energy STRICT 1 D. Box 1980, Hobbe, NM 88240		State of New Mexico ergy, Minerals and Natural Resources Department			Form C-104 Revised 1-1-89 See Instructions at Bottom of Page	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	DD, Anesia, NM 88210 P.O. J Santa Fe. New M			ATION DIVISION Box 2088		m of Page	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741			ABLE AND AUTHORI				
I. Operator			DIL AND NATURAL G	AS	API No.		
Bridge Oil Company	, L. P.			weit	API NO.		
12404 Park Central		te 400, Dalla					
Reason(s) for Filing (Check proper box		nge in Transporter of:	Other (Please expl	ain)			
Recompletion	Oil Casinghead Ga	Dry Gas	Effective 1	1/1/91			
If change of operator give name and address of previous operator							
II. DESCRIPTION OF WEL							
Humphrey Queen Uni		I No. Pool Name, Inci Langlie I	dattix 7 Rivers Qu	ieen State	of Lease Le Federal of Fee	ase No.	
Location Unit Letter	300	330 East Error The /	NORTH Line and 23	10	- INFST	-	
Section 3 Towns	250		70	Lea	eet From The	Line	
III. DESIGNATION OF TRA		Kauge	, NMPM,			County	
Name of Authonized Transporter of Oil		Condensate		hich approve	d copy of this form is to be set on, 127252	u)	
Shell Pipeline Name of Authorized Transporter of Cas		or Dry Gas			d copy of this form is to be set		
Sid Richardson Car	bon & Gasol Unit Sec.		<u>201 Main St., S</u>	Suite 3	000, Ft.Worth, T		
give location of tanks.	location of tanks. F+K 3 25S 37E			Yes UNKNOWN			
If this production is commingled with the IV. COMPLETION DATA	at from any other lea	se or pool, give commis	ngling order number:				
	loi	Well Gas Well					
Designate Type of Completio	n - (X)		New Well Workover	Deepen	Plug Back Same Res'v	Diff Res'v	
Designate Type of Completio Date Spudded	n - (X) Date Compi. Re		New Well Workover	Deepen	Plug Back Same Res'v P.B.T.D.	Diff Res'v	
	n - (X)	ady to Prod.	_L I	Deepen		Diff Res'v	
Date Spudded	n - (X) Date Compi. Re	ady to Prod.	Total Depth	Deepen	P.B.T.D.	Diff Res'v	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	n - (X) Date Compi. Re Name of Produc	ady to Prod.	Total Depth Top Oil/Gas Pay	I	P.B.T.D. Tubing Depth	Diff Res'v	
Date Spudded Elevations (DF, RKB, RT, GR, etc.)	n - (X) Date Compl. Re Name of Produc TUBI	ady to Prod.	Total Depth	D	P.B.T.D. Tubing Depth	l	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	n - (X) Date Compl. Re Name of Produc TUBI	ady to Prod. ing Formation ING, CASING AN	Total Depth Top Oil/Gas Pay D CEMENTING RECOR	D	P.B.T.D. Tubing Depth Depth Casing Shoe	l	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE	n - (X) Date Compl. Re Name of Produc TUBI CASING	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE	Total Depth Top Oil/Gas Pay D CEMENTING RECOR	D	P.B.T.D. Tubing Depth Depth Casing Shoe	l	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE V. TEST DATA AND REQUI OIL WELL (Test must be after	n - (X) Date Compl. Re Name of Produc TUBI CASING	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE OWABLE	Total Depth Top Oil/Gas Pay D CEMENTING RECOR DEPTH SET	D	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEME	1 NT	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE	n - (X) Date Compl. Re Name of Produc TUBI CASING	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE OWABLE	Total Depth Top Oil/Gas Pay D CEMENTING RECOR	D D wable for th	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEME	1 NT	
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Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE V. TEST DATA AND REQUI OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	TUBI CASING EST FOR ALLO recovery of total wo Date of Test Tubing Pressure	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE OWABLE olume of load oil and mu	Total Depth Top Oil/Gas Pay D CEMENTING RECOR DEPTH SET St be equal to or exceed top allow Producing Method (Flow, put) Casing Pressure	D D wable for th	P.B.T.D. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEME SACKS CEME state of the for full 24 hours etc.) Choke Size	1 NT	
Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE V. TEST DATA AND REQUI OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test	TUBI CASING EST FOR ALLO recovery of total wo Date of Test Tubing Pressure	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE OWABLE olume of load oil and mu	Total Depth Top Oil/Gas Pay D CEMENTING RECOR DEPTH SET St be equal to or exceed top allow Producing Method (Flow, put) Casing Pressure	D D wable for th	P.B.T.D. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEME SACKS CEME state of the for full 24 hours etc.) Choke Size	1 NT	
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Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE V. TEST DATA AND REQUI OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an is true and complete to the best of my	TUBI CASING Date Compl. Re Name of Produc TUBI CASING CASING CASING Date of Test Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure CATE OF CC Wations of the Oil C d that the informatio y knowledge and beli	ady to Prod. ing Formation NG, CASING AN & TUBING SIZE OWABLE Nume of load oil and mu (Shut-in) DMPLIANCE onservation n given above	Total Depth Top Oil/Gas Pay D CEMENTING RECOR DEPTH SET St be equal to or exceed top alloc Producing Method (Flow, put Casing Pressure Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CON	D owable for th mp, gas lift,	P.B.T.D. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEME SACKS CEME SACKS CEME Gas-MCF Gravity of Condensate Choke Size Choke Size	1 NT .,)	
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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.