Subrat 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, 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 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

	1	UIDA	IVO	- Oi	TI OIL	AND NAT	0111112 (311	Well A	DI No			
Bridge Oil Company,	L. P.							well A				
dress 12404 Park Central I		Suite	400	. D	allas	TX 7525	51					
	Tive,	ouice -	400	, 1	arras,		r (Please explai	in)				
eason(s) for Filing (Check proper box) ew Well Change in Transporter of:												
completion	Oil		Dry	•		Effe	ective 1	1/1/91				
ange in Operator	Casinghead	iGas 🔯	•		ite 🗌							
lange of operator give name									· <u>· · · · · · · · · · · · · · · · · · </u>			
address of previous operator DESCRIPTION OF WELL	AND LEA	SF										
ase Name	AIVD CEA	Pool	Nan	ne, Includir	ng Formation Kind ttix 7 Rivers Queen State,			Lease		Lease No.		
Humphrey Queen Unit		25		ng	lie Ma	ttix / R	ivers qu	een sae,	edeal of rec	<u></u>		
Unit Letter	. 66	990) Feet	From	n The 5	OUTH Line	and 99	O Fee	et From The	EAST	Line	
5 25C 37				37E			Lea	-				
Section 3 Townshi	p 25S		Ran	ge	3/E	, NN	ирм,	Lea			County	
DESIGNATION OF TRAN	SPORTE			ND	NATU	RAL GAS						
me of Authorized Transporter of Oil Shell Pipeline	XX	or Conde	nszte			P. O. B	ox 2648,	Houston	n, TX	7252 7252	ent)	
me of Authorized Transporter of Casin				ry G	ias	Address (Giw	e address to wh	uch approved	copy of this f	orm is to be se	ent)	
Sid Richardson Carb	on & Ga	soline	e Co) .			n St., S	Suite 30	00, Ft.	Worth, T	X 76102	
well produces oil or liquids,	Unit				Rge.			When				
e location of tanks.	FXK	3	1 25		137E	Ye		L	UNK.	NOWN		
nis production is commingled with that COMPLETION DATA	from any oth	er lease of	r pool,	give	commingl	ing order numb	жег:					
	~~	Oil We	li l	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion te Spudded		pi. Ready i	o Pro	d.		Total Depth	<u> </u>		P.B.T.D.	<u> </u>	1	
						Top Oil/Con Press						
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation					Top Oil/Gas	ray		Tubing Depth			
eriorations									Depth Casing Shoe			
		TIDING	CA	STN	IG AND	CEMENTI	NG PECOP	חי	<u> </u>			
11015.025		TUBING, CASING AND					DEPTH SET	<u> </u>	SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE				126	35 32.			 			
												
TEST DATA AND REQUE	ST FOR	ALLOW	/ABI	LE								
IL WELL (Test must be after	recovery of t	otal volum	e of lo	oad o	il and mus	t be equal to of	exceed top all	owable for thi	is depth or be	for full 24 ho	urs.)	
ate First New Oil Run To Tank	Date of T	est				Producing M	ethod (Flow, p	ump, gas lift,	eic.)			
ength of Test	Tubing Pr	Tubing Pressure					ure		Choke Size			
								<u> </u>	Gas- MCF			
ctual Prod. During Test	Oil - Bbls.					Water - Bbls	-					
GAS WELL												
ctual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
I. OPERATOR CERTIFIC	CATE O	F COM	IPLI	[A]	1CE		OIL COI	NOEDV	ATION	אואוען	ΩN	
I hereby certify that the rules and reg							OIL COI	NOEI IV				
Division have been complied with an is true and complete to the best of m				bove	•			1	17.	JV 19	1351	
	• .					Dat	e Approve		: O.: A	hvv		
June Stricht						Orig. Signed by Paul Kautz						
Signature Irene Wright	Regula ⁻	tory A	nal	yst	-	∥ By_			Geologisi			
Printed Name			Ti	ille		Title	e					
11/8/91	214	/788-3			ylo.							
Date		Т	elepho	one i	w 0.	11						

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.