Form 3160-5 OMB NO. 1004-0135 UNITED STATES

SUBMIT IN TRIPLICATED

Other Instructions on re
DEPARTMENT OF THE INTERIOR verse side) UNITED STATES (May 1989) Expires: September 30, 1990 5. LEASE DESIGNATION AND SERIAL NO. BUREAU OF LAND MANAGEMENT LC-032511-B 6. IF INDIAN, ALLOTTEE OR TRIBE HAME 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—" for such proposals.) 7. UNIT AGREEMENT NAME OIL GAS WELL OTHER Water Injection Well NAME OF OPERATOR 8. FARM OR LEASE NAME Bridge Oil Company, L.P. Langlie Mattix Queen Unit 3. ADDRESS OF OPERATOR 9. WELL NO. 12377 Merit Drive, Ste. 1600, Dallas, Texas 75251 21 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) 10. FIBLD AND POOL, OR WILDCAT At surface Langlie Mattix 7 Rivers Queen 11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA Unit Letter L: 1980' FSL & 660' FWL Sec. 14, T25S, R37E Sec. 14, T25S, R37E≇ 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH 18. STATE 3110' DF Lea N. Mexico Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF PRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING ABANDON MENT REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) Deepen well past plug back 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and somes pertinent to this work.) Drill out hydromite cap @ 3329'. Clean out frac sand to 3415'. Deepen well to 3520'. Run GR/N log. Acidize with 2000 gallons 15% NEFE. Run 2-3/8" tubing and set packer. Pressure test casing to 500 psi and monitor for 30 minutes. Return well to injection. After 7 days injection, run injection profile and temperature survey. Regulatory Analyst 12-06-90 DATE (This space for Federal or State office use)

*See Instructions on Reverse Side

APPROVED BY .

CONDITIONS OF APPROVAL, IF ANY: