Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO.

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: Langlie Mattix Queen Unit

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Water Injection Well

2. Name of Operator: Bridge Oil Company, L.P.

8. Well No.: 11

3. Address of Operator: 12377 Merit Drive, Suite 1600, Dallas, Texas 75251

9. Pool name or Wildcat: Langlie Mattix 7 Rivers Queen

4. Well Location
Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line

Section 15 Township 25S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3106'GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: Casing pressure test ☒	

12. 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.

10-21-90: Pulled tbg & pkr. Cleaned out fill to 3360'. Reran tbg & pkr to 3109' GLM.

10-22-90: Ran pressure test on casing. Pressured up to 510 psi for 2 hours. Tested OK. See attached chart.

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

SIGNATURE J. Michael Warren TITLE Regulatory Analyst DATE 10-31-90

TYPE OR PRINT NAME J. Michael Warren TELEPHONE NO. (214) 788-3363

(This space for State Use)

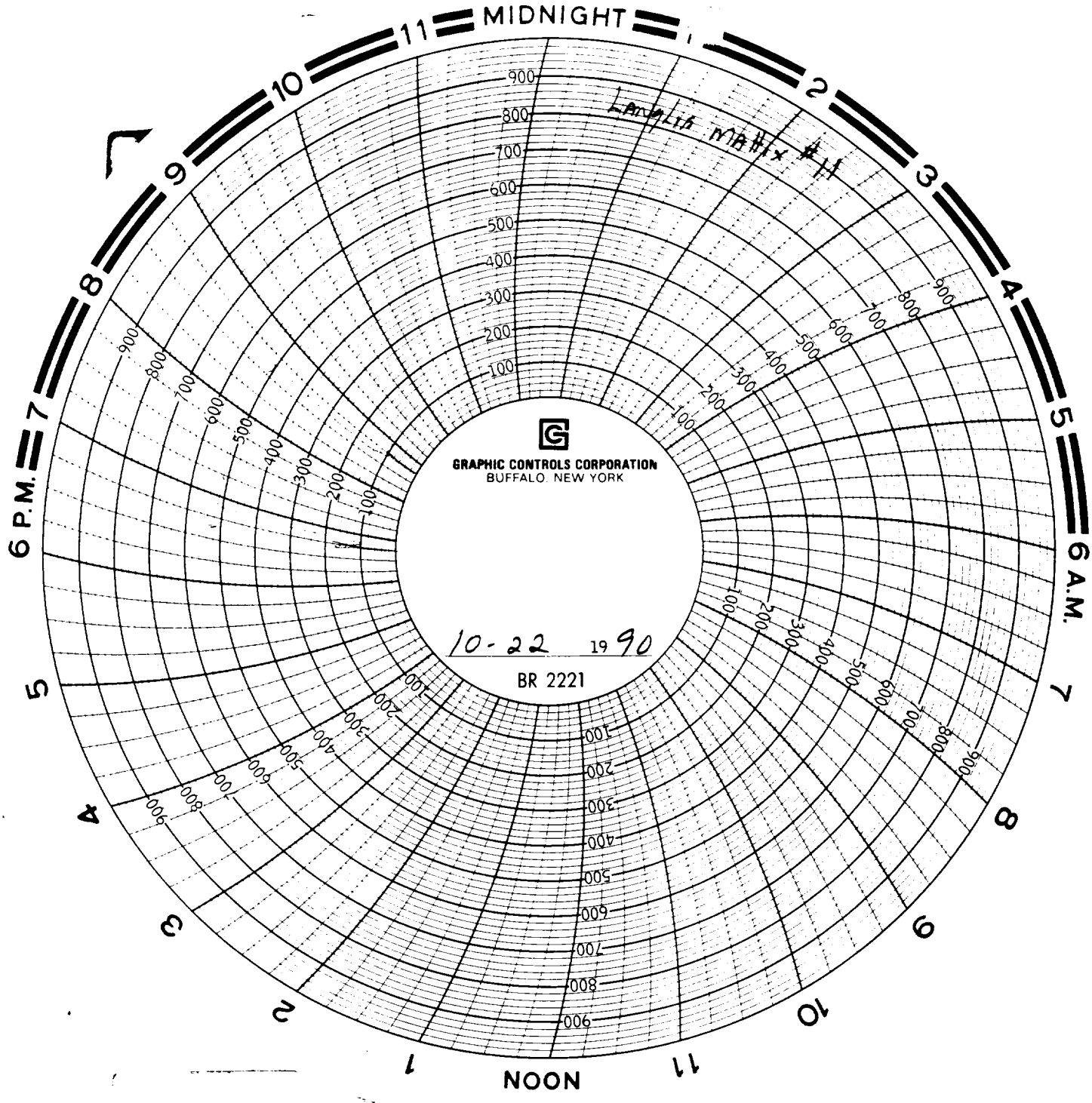
APPROVED BY Orig. Signed by, Paul Kautz, Geologist TITLE DATE NOV

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NOV 0 1 1990

OCD
HOBBS OFFICE


MIDNIGHT
NOON
6 P.M.
6 A.M.
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
10-22 1990
BR 2221

10-22-96

Langlie Mattix #11

	0 min	15 min	30 min
Csg Press (PSI)	510	510	510
Tbg Press (PSI)	0	0	0

NOV