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

State of New Mexico E. gy, Minerals and Natural Resources Departme

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	01	THAI	VSF	OHI OIL	I AN UNA	UHAL GA		No.				
perator Merit Energy Company			30.025-22155									
ddress 12221 Merit Drive, S	Suite 10	40, E)a11	las, TX 7	5251							
eason(s) for Filing (Check proper box) ew Well ecompletion hange in Operator	Ch Oil Casinghead G	ange in	Trans Dry C	porter of: Gas	Other EFF	(Please explai	2/1/91					
change of operator give name Bridge	Óil Com	npany	, L	. P., 124	104 Park	Central	Dr., St	e 400,	Dallas,	TX 75251		
. DESCRIPTION OF WELL A	ND LEAS	E										
case Name Langlie Mattix Queen U	nit 3	ell No.	Pool La	Name, Including nglie Mat	g Formation tix 7 R	ivers Qu	Kind of een State, F	Lease ederal on Fee		ase No.		
Ocation Unit Letter	. 165	0	Feet	From The	Line	and 23	10 Fee	et From The	\sim	Line		
Section 22 Township			Rang	27F		ирм,	_	ea		County		
II. DESIGNATION OF TRANS				ND NATUR	RAL GAS	e address to wh	:-k	ann af this f		-1)		
Name of Authorized Transporter of Oil Shell Pipeline		r Conden	ene.			Box 2648,				· L)		
Name of Authorized Transporter of Casing		(X)		ry Gas	Address (Giv	e address to wh	ich approved	copy of this f	orm is to be se			
Sid Richardson Carbon- If well produces oil or liquids,			O.	Roe		in St.,Su y connected?	uite 300 When	2		X 76102		
ive location of tanks.		<i>15</i>	: -	S 37E		es		UNK	NOWN			
f this production is commingled with that f V. COMPLETION DATA	iom any other	lease or	pool,	give commingli	ng order num	ber: 두분 :37학/9	3					
Designate Type of Completion		Oil Well		Gas Well	New Well	•	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Compi.	Ready to	o Pro	1.	Total Depth		l	P.B.T.D.	1	<u>.l</u>		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing F	onna	tion	Top Oil/Gas	Pay		Tubing Depth				
Perforations								Depth Casing Shoe				
	π	JBING	. CA	SING AND	CEMENTI	NG RECOR		1				
HOLE SIZE CASING & TUBING					DEPTH SET			SACKS CEMENT				
V. TEST DATA AND REQUES	ST FOD A	HOW	AR	LE.				<u> </u>				
OIL WELL (Test must be after t									for full 24 ho	urs.)		
Date First New Oil Run To Tank	Date of Test	ì			Producing N	Aethod (Flow, p	ump, gas lýt,	eic.)				
Length of Test	Tubing Pres	sure			Casing Pres	sure	····	Choke Size				
Actual Prod. During Test	Oil - Bbls.				Water - Bbi	S.		Gas- MCF				
GAS WELL		· · · · · · · · · · · · · · · · · · ·			_!							
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
VI. OPERATOR CERTIFIC I hereby certify that the rules and regular distribution have been complied with any is true and complete to the best of my	ulations of the d that the infor	Oil Con	servat give n	ion		OIL CO		/ATIGA	DIVISI N 2 2 '92	ON		
as true and complete to the best of my		, oviiti.			Da	te Approv						
Signature Joe A. Marek Executive Vice President					Ву	By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
Printed Name			7	ītle	Titl	e	, , , , , , , , , , , , , , , , , , , ,					
1/15/92 Date	214	1/701 1		ione No.	EOE	DEC	700	ORII V	ממג	30 1993		
			F.				<u>JKU </u>		APK	<u>.) U 133</u> .		

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.

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State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	<u>O THA</u>	<u> N2F</u>	OHI OIL	AND NAT	UHAL GA		DI No				
Merit Energy Compan		Well API No. 30-025-22-155										
ddress 12221 Merit Drive,	Suite 1	.040,	Dall	las, TX 7	5251:							
eason(s) for Filing (Check proper box)						(Please explai	in)					
ew Well	•	Change in	Trans	porter of:			0/1/01	. 1. 100				
ecompletion	Oil		Dry (Gas 🖳	EFF!	ECTIVE 4	4-14-9-1-	<u>1/</u> 1/92				
hange in Operator	Casinghead	Gas 🔲	Cond	ensate								
change of operator give name address of previous operator Bridge	Oil Co	ompany	, L	. P., 124	104 Park	Central	Dr., S	Ste 400,	Dallas,	TX 7525		
DESCRIPTION OF WELL	AND LEA	SE										
case Name Langlie Mattix Queen J		Well Na. 33	Pool La:	Name, Includin nglie Mat	g Formation ttix 7 R	ivers Qu	een State,	of Lease Federal on Fee		ase No.		
ocation		C_{Δ}				2 2						
Unit Letter	·:	30	_ Feet	From The	Line	and				Line		
Section 22 Township	<u>25S</u>	<u> </u>	Rang	ge 37E	, NN	ирм,		Lea		County		
II. DESIGNATION OF TRAN	SPORTE			ND NATU	RAL GAS	e address to wi	ich appeau	d come of this f	nem is to he se	mt)		
Name of Authorized Transporter of Oil	\square	or Conde	DESTE							,		
Shell Pipeline						Box 2648						
Name of Authorized Transporter of Casing				ory Gas 🗔		e address to wi						
Sid Richardson Carbon	-: 1						uite 50	ite 3000, Ft. Worth, TX 761				
If well produces oil or liquids, give location of tanks.	Unit	Sec. 15	Twp	5S 37E	i i	y connected?	j Whe	"! UNK!	UNKNOWN			
f this production is commingled with that									,			
V. COMPLETION DATA	Hom any on	, , , , , , , , , , , , , , , , , , ,	, poor,	Bive commende		, <u></u>			<u></u>			
Designate Type of Completion	- (20)	Oil We	11	Gas Well	New Weil	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion Date Spudded	Date Com	pi. Ready	to Pro	<u>. </u>	Total Depth	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	P.B.T.D.				
·					Top Oil/Gas	Day			IT bis Doorb			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing i	Formal	tion	Top Oil Cas	<u>-</u>			Tubing Depth			
Perforations	<u> </u>							Depth Casi	ng Shoe			
		TIBING	. CA	SING AND	CEMENT	NG RECO	RD					
HOLE SIZE	- ,				CLINDAVI	DEPTH SE			SACKS CEMENT			
HOLE SIZE		CASING & TUBING SIZE										
V. TEST DATA AND REQUE	ST FOR	ALLOV	VAB	LE	<u></u>			!	,			
OIL WELL (Test must be after	recovery of	total volum	ne of la	oad oil and mus	s be equal to c	or exceed top a	ilowable for	this depth or be	e for full 24 ho	urs.)		
Date First New Oil Run To Tank	Date of T				Producing N	Method (Flow,	pump, gas lij	t, etc.)				
Length of Test	Tubing P	ressure			Casing Pres	sure		Choke Siz	Choke Size			
	Oil - Bbl				Water - Bbi			Gas- MCI	Gas- MCF			
Actual Prod. During Test	Oil - Bol											
GAS WELL		. T			Rhie Cond	ensale/MM/T		Gravity	Condensate			
Actual Prod. Test - MCF/D	Length o	Jan 1 cel		. •	Bbls. Condensate/MMCF				Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing i	Pressure (S	ក្រាក-ក)	Casing Pre	ssure (Shut-in)		Choke Si	2 e			
VI. OPERATOR CERTIFI	CATEC	OF COM	ΛPI	IANCE	1	0" 05						
I hereby certify that the rules and rep					11	OIL CC	NSEH	VATION				
Division have been complied with a	nd that the in	formation	given	above				JAI	V 2 2 '92			
is true and complete to the best of m	y knowledge	and belie	ſ.	1	Da	te Approv	/ed					
	111	To a	[_								
Signature					∥ Ву	By ORIGINAL SIGNED BY SERVIN SEXTON						
Joe A. Marek Executive Vice President Printed Name Title					Title							
1/15/92	2	14/70	_									
Date			I clept	none No.								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
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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 TO TRANSPORT OIL AND NATURAL GAS

·	•	<u> </u>		<u> </u>			Tu	ell Al	l No		1	
Operator Bridge Oil Company,	Г. Р.							-m /M				
Address 12404 Park Central D		nite 4	.00	Dallas	TX 7525	51						
Reason(s) for Filing (Check proper box)	1100, 0		<u>∪</u> ,	,		t (Please explai	in)					
New Well		Change in	Transn	oorter of:		·	•					
	Oil			25	500		101					
Recompletion \Box	Casinghead		•		Effective 11/1/91							
Change in Operator	Casingnead	Gas A	Conor	ensate								
f change of operator give name and address of previous operator												
I. DESCRIPTION OF WELL	AND LEA	SE			· · · · · · · · · · · · · · · · · · ·				.			
Lease Name Langlie Mattix Queen	9				of Lease Lease Federal on Fee		ise No.					
Location	1	<i>33</i> _	l				i			. /		
Unit Letter	: <u>165</u>	0	Feet l	From The	AST Line	and <u>23/</u>	0	Fee	t From The _	NORTH	Line	
Section 22 Township	Section 22 Township 25S Range 37E							Le	a		County	
									- · · · · =	-		
III. DESIGNATION OF TRAN				NU NATUI		e address to wh	ich an-	أدمدون	come of this fa	ym is to be see	et)	
Name of Authorized Transporter of Oil Shell Pipeline	XX	or Conden	كلفد		P. O. B	ox 2648,	Hou	stor	1, TX 77	252	- /	
Name of Authorized Transporter of Casing	head Gas		Or Dr	ry Gas		e address to wh					u)	
Sid Richardson Carbo	on & Gas				201 Mai	01 Main St., Suite 3000, Ft. Worth						
If well produces oil or liquids,	Unit	Sec.	Twp.		1 7			When?			_ /	
give location of tanks.	191	/5	255				L		22/02/		<u></u>	
If this production is commingled with that: IV. COMPLETION DATA	nom any out	et icane of	pool, (Rive commingi	ng older num	<u></u>						
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Dee	реп	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Comp	ol. Ready to	o Prod.	•	Total Depth	L	L <u>.</u>		P.B.T.D.		<u> </u>	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth			
Perforations									Depth Casin	ig Shoe		
	T	UBING.	CAS	SING AND	CEMENTI	NG RECOR	D		1	· · ·		
HOLE SIZE CASING & TUBING SIZE						DEPTH SET			SACKS CEMENT			
	<u> </u>			:-:=-				·				
											<u></u>	
V. TEST DATA AND REQUE	ST FOR A	LLOW	ABI.	E					<u> </u>	·		
OIL WELL (Test must be after t					be equal to o	exceed top allo	owable	for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te					ethod (Flow, pi						
						Cooing Process				Choke Size		
Length of Test	Tubing Pre	essure			Casing Pressure				CHORE SIZE			
Actual Prod. During Test	al Prod. During Test Oil - Bbls.							Gas- MCF				
CASWELL					<u> </u>							
GAS WELL Actual Prod. Test - MCF/D	Length of	Test			Bbis. Conde	nsate/MMCF			Gravity of	Condensate	_	
Property a room a come - arroad (12)	rengar or	. vol										
Testing Method (pitot, back pr.)	Tubing Pr	essure (Shi	ut-in)		Casing Pres	sure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	TATEO	COM	DI T	ANCE	 			 				
						OIL COI	NSE	RV	ATION	DIVISIO	NC	
I hereby certify that the rules and regularisis and have been complied with and						- 3 - 3 - 3 - 3 - 3						
is true and complete to the best of my	Date Approved											
Diene Skrie	1+				Dat	e whhinke		one	l her			
Signature	∥ By_	By Paul Kauts Geologist										
Irene Wright Printed Name	Regulat	ory Ar	naly Tiu				F i 60∏	0 हे ज् र्	y *			
11/8/91	214/	788-33	300		Title	9					 	
Date		Te	lephor	ne No.								

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