

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 <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection Well	7. Lease Name or Unit Agreement Name Langlie Mattix Queen Unit
2. Name of Operator Bridge Oil Company, L.P.	8. Well No. 28
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 <u>B</u> : <u>500</u> Feet From The <u>North</u> Line and <u>2540</u> Feet From The <u>East</u> Line Section <u>22</u> Township <u>25S</u> Range <u>37E</u> NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3070' KB

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Deepen past plug back ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

Drill out CIBP at 3400'. Clean out to 3516'. Perforate w/ 2SPF from 3493'-3499'. Acidize with 2000 gallons 15% NEFE. Run 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.

Note: This is a change of plans from original C-103 approved on 11-01-90. Verbal approval for this work was obtained from Bonnie Pritchard on 11-19-90.

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

11-19-90

TYPE OR PRINT NAME

J. Michael Warren

(214) 788-3363  
TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: