Subrait 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, Antenia, NM 88210

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 TO TRANSPORT OIL AND NATURAL GAS

Operator		10 111/	1110	1 0111 011		TOTIAL		API No.			
BRIDGE OIL COMPANY, L. P.						30-025-2378					
Address				_							
12377 Merit Drive, S Reason(s) for Filing (Check proper box)	te. 160	0, Dal	las	, Texas		et (Please exp	<i>I-i-</i>)				
New Well		Change in	Тгали	sporter of:		er (Lieuse exp	taur)				
Recompletion	Oil		Dry	. —							
Change in Operator	Casinghead	G≊s 🔲	Con	densate 🗌							
If change of operator give name and address of previous operator	rus Oil	Compa	iny,	L. P.,	12377 Me	rit Driv	e, Ste.	1600,	Dallas,	Texas 752	
II. DESCRIPTION OF WELL	AND LEA	SE			Effectiv	e 1/01/	90				
Lease Name		Well No.	Pool	Name, Includi	ing Formation	Divons (of Lease		ease No.	
Langlie Mattix Quee	n Unit	37	La	ingire ma	accix /	Kivers C	(ueen s		^		
Unit Letter	. 200	0	Foat	From The	URS+ Lin	0β and)00 F	est From The	Sout	h Line	
15							•				
Section / Townshi	<u> 25-S</u>		Rang	æ 37-E	, N	MPM,	Lea			County	
III. DESIGNATION OF TRAN	SPORTE	OF O	TL Ą	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil	χ	or Conden	sale						form is to be st		
Name of Authorized Transporter of Casing	+ '' -	Box 20			form is to be se	7252					
El Paso Natural	Gas	Com		ny Ges 🖂	Box	149Z.		50, T	79	978	
If well produces oil or liquids, rive location of tanks.	Unit	Sec	Twp	<u> </u>	is gas actuali	y connected?	Whe	3 , n k	nown		
If this production is commingled with that		<u> </u>	125		1 12			- CITE	HUWPI		
IV. COMPLETION DATA	from any ours	rasae or p	pout, į	Rive community	ruft orger preu						
Designate Trans of Completion	~	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		Pendy to	Brod		Total Depth		<u> </u>	I DOTO	<u> </u>		
Date Spudded Date Compl. Ready to Prod.								P.B. I.D.	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations								Denth Casin	Depth Casing Shoe		
									- 5 C		
	π	JBING,	CAS	SING AND	CEMENTI	NG RECOR	D D				
HOLE-SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
		-			_			+			
V. TEST DATA AND REQUES OIL WELL (Test must be after re					he emal to or	erceed top all	oumble for th	is denth or he	for full 24 hour	pe)	
Date First New Oil Run To Tank	Date of Test		oy ioux	2 OU DAL MASI		thod (Flow, p			OF 1411 24 NOW	3.)	
ength of Test Tubing Pressure					Casing Pressure			Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.	il - Bbls.				Water - Bbls.			Gas- MCF		
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbis. Conden	nte/MMCF		Gravity of C	Gravity of Condensate		
ing Method (puot, back pr.) Tubing Pressure (Shut-in)					Casing Press.	re (Shut-in)		Choke Size	Choke Size		
						•					
VI. OPERATOR CERTIFICA	ATE OF	COMP	LIA	NCE		\!\ CO\	ICEDV	ATION			
I hereby certify that the rules and regulations of the Oil Conservation						JIL CON	NOEN V		DIVISIO		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					FEB 1 3 1990						
					Date	Approve	u				
Lora Mc Tough					By ORIGINAL SIGNED BY JERRY SEXTON						
Signature Dora McGough Regulatory Analyst					DISTRICT I SUPERVISOR						
Printed Name		_	Title		Title						
January 8, 1990 Date	214/788·		phone	No.			-	_ -			
		P			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.