

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. 30-025-30974
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Langlie Mattix Water Supply Well
8. Well No. 1
9. Pool name or Wildcat Undesignated San Andres

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 Supply Well	
2. Name of Operator BRIDGE OIL COMPANY, L. P.	
3. Address of Operator 12377 Merit Drive, Ste. 1600, Dallas, Texas 75251	
4. Well Location Unit Letter <u>A</u> : <u>1216</u> Feet From The <u>North</u> Line and <u>1300</u> Feet From The <u>East</u> Line Section <u>15</u> Township <u>25S</u> Range <u>37 East</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3103.2 Gr.	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Change Location & BOP Program <input checked="" type="checkbox"/>

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. -

- To change location as follows: 1216 feet from the North Line and 1300 feet from the East Line of Section 15, T 25S, R 37 East, Lea County, New Mexico
- BLOWOUT PREVENTER PROGRAM:

Casing String	BOP Size & API Series	No. & Type	Test Pressure (psi)
13-3/8"	None		600 psi
8-5/8"	11" - 3000 psi	1 - Double Ram	2000 psi

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

SIGNATURE Dora McGough TITLE Sr. Regulatory Analyst DATE Sept. 18, 1990
214/
TYPE OR PRINT NAME Dora McGough TELEPHONE NO. 788-3300

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 24 1990

Submit to Appropriate
District Office
State Leases - 4 copies
Fee Leases - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

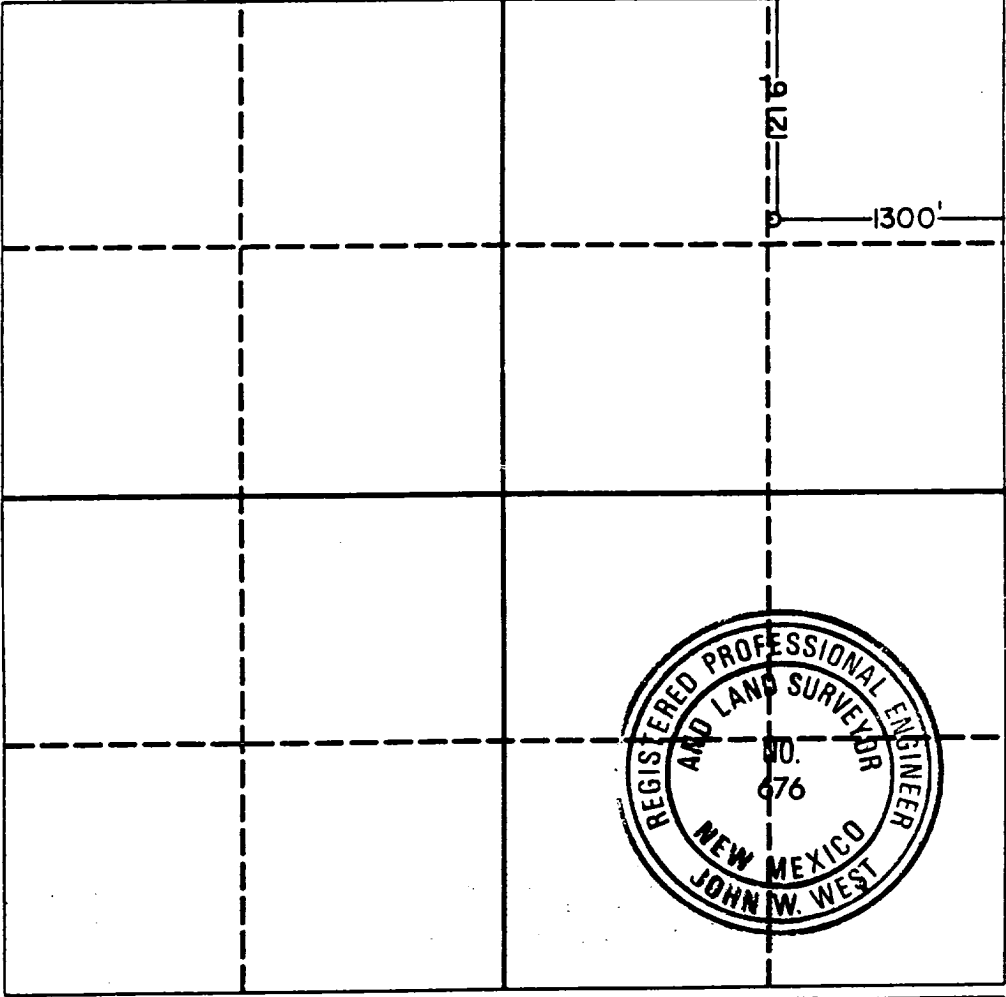

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator BRIDGE OIL COMPANY			Lease LM Water Supply Well		Well No. 1
Unit Letter A	Section 15	Township 25 South	Range 37 East	County Lea	
Actual Footage Location of Well: 1216 feet from the North line and 1300 feet from the East line					
Ground level Elev. 3103.2	Producing Formation San Andres		Pool Undesignated San Andres		Dedicated Acreage: Acres
<p>1. Outline the acreage dedicated to the subject well by colored pencil or lacquer marks on the plat below.</p> <p>2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).</p> <p>3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____</p> <p>No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.</p>					
 <div data-bbox="727 1591 1052 1917" data-label="Image"></div>				OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature <i>Dora McGough</i> Printed Name Dora McGough Position Sr. Regulatory Analyst Company Bridge Oil Company, L. P. Date September 18, 1990	
				SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed July 18, 1990 Signature & Seal of Professional Surveyor <i>John W. West</i> Certificate No. JOHN W. WEST, 676 RONALD J. EIDSON, 3239	

128630

Amended

RECEIVED

SEP 24 1990

OCD
HOBBS OFFICE