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PRODUCTION OFFICE	

RECEIVED BY CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
JUN 19 1986  
O. C. D. REQUEST FOR ALLOWABLE  
ARTESIA, OFFICE AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator  
Parker & Parsley Petroleum Company  
Address  
P.O. Box 3178, Midland, TX 79702  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Change effective July 1, 1986

If change of ownership give name and address of previous owner  
HCW Exploration, Inc., P.O. Box 10585, Midland, TX 79702

## DESCRIPTION OF WELL AND LEASE

Lease Name SRC State	Well No. 1-Y	Pool Name, Including Formation Und. Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No. L-4956
Location Unit Letter 0 : 660 Feet From The South Line and 1990 Feet From The East Line of Section 16 Township 26-S Range 30-E, NMPM, Eddy County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Lantern Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2281, Midland, TX 79702	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79999	
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 16 Twp. 26S Rge. 30E	Is gas actually connected? Yes	When 4-7-81

If this production is commingled with that from any other lease or pool, give commingling order number:

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			Post ID-3
			2-6-87
			Chg Op

## TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pistol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Vice-President, Operations

June 16, 1986

(Title)

(Date)

## OIL CONSERVATION DIVISION

APPROVED FEB 6 1987

BY Original Signed By  
Mike Williams

TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.