

DISTRICT I
P.O. Box 1500, Hobbs, NM 88240

DISTRICT II
P.O. Box 200, Lordsburg, NM 88020

DISTRICT III
1000 Elgin Avenue S.E., Albuquerque, NM 87102

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

Revised 1-1-89
See Instructions
at Bottom of Page

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FEB - 7 1991

file

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

O. C. D.
ARTESIA, OFFICE

I. OPERATOR
Operator: Parker & Parsley Development Company
Address: P. O. Box 3178, Midland, Texas 79702
Reason(s) for Filing (Check proper box):
New Well ☐ Change in Transport of ☐ Other (Please explain) ☐
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Operator ☒ Outgassed Gas ☐ Condensate ☐
If change of operator gives name and address of previous operator: Parker & Parsley Petroleum Company

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Pardue Farms 26 Btry 3 Well No.: 3 Pool Name, including Formation: East Loving (Delaware) Brushy Canyon Kind of Lease: Fee State, Federal or Private: State Lease No.:
Location: Unit Letter F : 2080 Feet From The North Line and 1980 Feet From The West Line
Section 26 Township 23S Range 28E N.M.P.M. Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent): Permian Corporation Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Outgassed Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent): El Paso Natural Gas Company Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks: Unit E Sec. 26 Twp. 23S Rgn. 28E Is gas actually connected? Yes When? 5-81
If the production is commingled with that from any other lease or pool, give commingling order number: _____

IV. 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.			
Dimensions (D.P., R.C.B., RT, CR, 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

V. 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 test allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <u>ported ID-3 4-5-91</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF <u>Choke OP</u>

GAS WELL

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

VI. OPERATOR 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.

Signature: Virginia Carter
Virginia Carter Proration Analyst
Printed Name: 2-5-91 Title: 915 683 4768
Date: _____ Telephone No.: _____

OIL CONSERVATION DIVISION

Date Approved APR 2 1991
By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.