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TRANSPORTER	OIL
	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-85
FEB 23 1984	
O. C. D.	
ARTESIA, OFFICE	

I.

Operator	PETROLEUM DEVELOPMENT CORPORATION		
Address	9720-B Candelaria N.E., Albuquerque, New Mexico 87112		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input checked="" type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Isler Pennzoil Fed.	1	Unders. Abo	Federal
Location			
Unit Letter	M	660 Feet From The	South Line and 660 Feet From The West
Line of Section	3	Township	7 Range 26, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Pecos River Gas Plant, LTD. Spur Pipeline Co.				103 N. Pennsylvania Ave. Roswell, NM 88201
If well produces oil or liquids, give location of tanks.	No Liquids	Unit	Sec.	Is gas actually connected? When
				Yes 2/2/84

If this 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.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
3/13/83	6/27/83	4650'	4587'					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Unders. Abo	Abo	4164'	4410'					
Perforations	Depth Casing Shoe							
4435' - 4441' and 4164' - 4174' 4 JHPF								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" - 24#	862'	275 sx 50/50 Poz; 150 sx
			Ch "C" Circ. 100 sx
7 7/8"	4 1/2" - 10.5#	4641'	350 sx 50/50 Poz
	2 3/8" - 4.7#	4410'	400 sx " " from 1400

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 top allowable for this depth or be for full 24 hours)

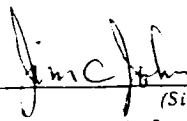
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1419	4 hrs.	-	-
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back pressure/pt.	632	820	18/64"

VI. CERTIFICATE OF COMPLIANCE

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


(Signature) Jim C. Johnson, Jr.
Field Manager

(Title)

February 15, 1984

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 29 1984, 19_____
BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

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

If this is a request for allowable for a newly drilled or deepened 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 Sections I, II, III, and VI only 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.