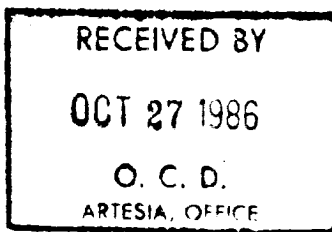


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT



Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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SANTA FE		✓
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LAND OFFICE		✓
TRANSPORTER	OIL	✓
	GAS	✓
OPERATOR		✓
PROMOTION OFFICE		✓

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
PARKER & PARSLEY PETROLEUM COMPANY

Address
P.O. BOX 3178, MIDLAND, TEXAS, 79702

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Effective 11-1-86

If change of ownership give name and address of previous owner **MADDOX ENERGY CORPORATION, 200 CRESCENT COURT, STE.1610 DALLAS, TEXAS, 75201**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Spencer Com.	Well No. 1	Pool Name, Including Formation Atoka Penn	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter F : 1650 Feet From The North Line and 1650 Feet From The West				
Line of Section 9 Township 18S Range 26E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Co.	P.O. Box 159 Artesia, NM, 88210
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)
Transwestern Pipeline Co.	P.O. Box 2521, Houston, Texas, 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 9 18S 26E Yes 11/21/80

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

[Signature]

E Bradford Mantz
(Signature)

Agent

(Title)

11/1/86

(Date)

OIL CONSERVATION DIVISION

APPROVED **DEC 30 1986**, 19

BY **Original Signed By**

Les A. Clements

Supervisor District 11

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 deviating 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 multiply completed wells.

Post ID-3
1-2-87
chg op

