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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	<input checked="" type="checkbox"/>
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OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

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"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

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	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Earl Guitar	1	Malaga Morrow	State, Federal or Fee Fee	

Location  
Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East

Line of Section 23 Township 24S Range 28E . NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Coporation	P.O. Box 1183, Houston, Texas, 77001
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)
El Paso Natural Gas	P.O. Box 1492, El Paso, Texas, 79978


If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range.	Is gas actually connected?	When
	G	23	24S	28E		<u>Post ID-3</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 1-2-87  
*chg op*

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.

  
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  
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 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.

YH 03-0019  
1971  
10-13  
10-13 AM '71

20-1-1-1  
YH 03-0019  
10-13-71  
10-13-71