RECE	WED BY		
	27 1986		
STATE OF NEW MEXICO	SIA, OFFICE	Form C-104	
P. O. BO	ATION DIVISION x 2088 v mexico 87501		
LAND OFFICE			
OFERATOR A	R ALLOWABLE ND PORT OIL AND NATURAL GAS		
PARKER & PARSLEY PETROLEUM COMPANY	/		
Address P.O. BOX 3178, MIDLAND, TEXAS, 79702 Reoson(s) for filing (Check proper box)	2 Other (Please explain)		
	andensale Effective 11-	-1-86	
If change of ownership give name MADDOX ENERGY CORPORATION, 200 CRESCENT COURT, STE. 1610 DALLA and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Lecze Name Well No. Pool Name, Including Formation		Lease No.	
Pardue Farms 211Wildcat BoneLocation		ee	
		orth	
	28E , NMFM, Eddy	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of OIL or Condensate	Address (Give address to which approved copy of th		
Permian Corporation Hame of Authorized Transporter of Casinghead Gas or Dry Gas	P.O. Box 1183, Houston, Te Address (Give address to which approved copy of th	is form is to be sent)	
El Paso Natural Gas Co	P.O. Box 1492, El Paso, Te	exas, 79978	
if well produces oil or liquids, give location of tanks. B 21 238 28E	NO	Post ID-3	
If this production is commingled with that from any other lease or pool,	give commingling order number:	1-2-87	
NOTE: Complete Parts IV and V on reverse side if necessary.		chg. op.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVIS	SION	
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	APPROVED DEC 30 1986 Original Signed By		
my knowledge and belief.	BYLes A. Clements		
HI-	TITLE Supervisor District 11		
E Bradford Mantz (Signature)	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.		
Agent (Title)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
(Date) (W)	Fill out only Sections I, II, III, and V. well name or number, or transporter, or other a Separate Forms C-104 must be filed fo	uch change of condition.	
	completed wells.		

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