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OCT 27 19	
STATE OF NEW MEXICO O. C. D.	
ENERGY AND MINERALS DEPARTMENT ARTESIA, OFF	Revised 10-01-78
SANTA PE	ATION DIVISION Format 06-01-83 Page 1
PILE I I I I	DX 2088 W MEXICO 87501
LAND OFFICE	
	R ALLOWABLE
PROBATION OFFICE	PORT OIL AND NATURAL GAS
1. Operator	
PARKER & PARSLEY PETROLEUM COMPANY	
P.O. BOX 3178, MIDLAND, TEXAS, 7970	
Reason(s) for filing (Check proper box) New Well Change in Transporter of:	Other (Please explain)
	ry Gas FII for the second
XX Change in Ownership Casinghead Gas C	ondensate Afectice 11-1-86
If change of ownership give name MADDOX ENERGY CORPORATION, 200 CRESCENT COURT, STE. 1610 DALLA and address of previous owner	
TEXAS, 75201	
Lesse Name TAmma 07 Dtarra Well No. Pool Name, Including F	ormation Kind of Lease Lease No. Uff Bone Spgs state, Federal or Fee Fee
Location	
Unit Letter <u>P: 660</u> Feel From The South Line and <u>660</u> Feet From The East	
Ling of Section 27 Township 238 Range	28E , NMFM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	
Name of Authorized Transporter of Oll or Condensate	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1183 Houston Texas 77001
Name of Authorized Transporter of Casinghead Gas or Dry Gas	P.O. BOX 1183, Houston, Texas, 77001 Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO.	P.O. BOX 1492, El Paso, Texas, 79978
If well produces oil or liquids, give location of tanks. H 27 238 281	Yes 9/26/81 Post TD-3
If this production is commingled with that from any other lease or pool, give commingling order number: 1-2-27	
NOIE: Complete Parts IV and V on reverse side if necessary.	chg. Op
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the tules and regulations of the Oil Conservation Division have	APPROVED DEC 30 1986 19
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BYBY
	TITLE Supervisor District II
STAC	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepensed well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.
(Title)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.
(Date)	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.