

DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

DISTRICT II
P.O. Box 2088, Santa Fe, NM 87504

DISTRICT III
1000 E. Main St., Alamogordo, NM 88001

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Revised 1-1-80
See Instructions
at Bottom of Page

FEB - 7 1991

O. C. D.
ALAMOGORDO, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Parker & Parsley Development Company	Well No. 1
Address P. O. Box 3178, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) New Well ☐ Change in Transporter of: Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☒ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator Parker & Parsley Petroleum Company	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pardue Farms 27 Btry 1	Well No. 4	Pool Name, including Formation S. Culebra Bluff (Bone Spring)	Kind of Lease Fee	Lease No.
Location Unit Letter P : 660' Feet From The South Line and 660' Feet From The East Line Section 27 Township 23-S Range 28-E N.M.P.M. Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-9

Name of Authorized Transporter of Oil Permian Corporation ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rgn. Is gas actually connected? When? H 27 23S 28E Yes 9/26/81
If this production is commingled with that from any other lease or pool, give commingling order number. R-8918	

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size posted 10-3 4-5-91
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF Edg of

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Flowing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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

Signature Virginia Carter
Virginia Carter Proration Analyst
Printed Name
2-5-91
Date
915 683 4768
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 2 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.