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## State of New Mexico Energy, Minerals and Natural Resources Department

Santa Fe File	P	
BLM		
Land Office		
B of M		
Operator	V	

Form C-103 Revised 1-1-89

## DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

6.	State Oil & Gas Lease No.		
	STATE	FEE	X
5.	Indicate Type of Lease		
v	LL API NO.		

1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  DIFFERENT RESERVOIR. USE APPLICATION FOR PERMECEIVED	7. Lease Name or Unit Agreement Name
I. Type of Well:  OIL GAS GAS	Pardue Farms 27
2. Name of Operator Parker & Parsley Petroleum Company  3. Address of Operator P. O. Box 3178, Midland, Texas 79702  ARTESIA, OFFICE	8. Well No. 8 9. Pool name or Wildcat
4. Well Location	Delaware (Bell Canyon)  Feet From The East Line
Section 27 Township 23S Range 28E  10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3033.1 GR	NMPM Eddy County
11. Check Appropriate Box to Indicate Nature of Notice, R	eport, or Other Data

SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMEN **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB X OTHER: OTHER:\_ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6-3-89: Reach TD 4850'. Ran 117 jts. 7", 29, 32# S95, STC csg. Set @4850'. Used RGS, AF float shoe & float collar, 10 cent & set marked jt @4397'. Cmt'd w/1500 sx 6-5-89: Lite Prem, 6% gel, 5% salt, 1/4#/sx Cello-Seal; tailed in w/800 sx. Class "C", 2% CaCl & 1/4# sx Cello-Seal. Circ. 160 sx to reserve pit. Displ w/2% KCL wtr. PD @11:30 a.m. 6/5/89.

Test csg & BOP to 600 psig f/30 minutes OK

	1000 008 0 2	or to ooo psig 1/30 minutes, ok.	
I hereby certify that the inform	ation above is true and complete to the best of my kr	nowledge and belief.	
SKINATURE Korol	R. Johnson	Operations Engineer	DATE 6-6-89
	<b>\</b>		
TYPE OR PRINT NAME	Randy R. Johnson		TELEPHONE NO. 915 683 4768
TIPE OR FRINT NAME			TELEPHONE NO. 915 683 4768
TIPE OR FRINT NAME	ORIGINAL SIGNED BY		IELEPHONE NO.
(This space for State Use)  Altroved by		TITLE	JUN 1 2 1989