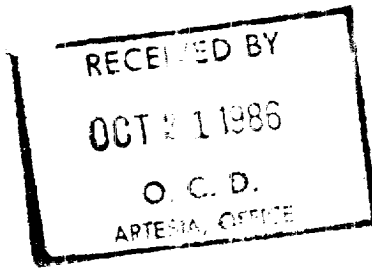


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT



Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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U.S.G.E.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	✓
PROMOTION OFFICE	

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

Other (Please explain)
(Handwritten: 1E)

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 Flower Draw Unit	Well No. 4	Pool Name, including Formation Und. Delaware	Kind of Lease State, Federal or Fee State	Lease No. LG-1171
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East Line of Section 3 Township 26S Range 28E , NMPM, EDDY County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	No

(Handwritten: Post FD-3 1-2-87 Cng ap)

If this production is commingled with that from any other lease or pool, give commingling order number: _____

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.

(Signature)
E Bradford Mantz
(Title)
Agent
11/1/86
9/1/86
(Date)

OIL CONSERVATION DIVISION
DEC 30 1986
APPROVED _____, 19____
BY _____
Original Signed By
Les A. Clements
TITLE _____
Supervisor District I

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.