

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT: -

## SUNDRY NOTICES AND REPORTS ON WELLS



FORM APPROVED OMB NO. 1004-0137 ARTE Expires March 31, 2007

NM NM 108921

	6.	If Indian,	Allottee	or Tribe	Name
- 1			ł		

Do not use this form for p abandoned well. Use Form			6.	If Indian, Allot	tee or Tribe Name	
SUBMIT IN TRIPLICATE - 0	7.	If Unit or CA/	Agreement, Name and/or N			
1. Type of Well  Oil Well X Gas Well Other  2. Name of Operator  PARALLEL PETROLEUM CORPORATION  3a. Address  1004 N BIG SPRING, SUITE 400, MIDIA  4. Location of Well (Footage, Sec., T., R., M., or Survey I	NO TX 79701			8. Well Name and No.  DUKE 4 FEDERAL 2  9. API Well No. 20 30-015-35246  10. Field and Pool, or Exploratory Area WALNUT CREEK, WOLFCAMP POOL		
SL: 818 FSL & 459 FEL ACTUAL: PP: 848 FSL & 708 FEL S	j	11. County or Parish, State				
12. CHECK APPROPRIATE	BOX(ES) TO INI	DICATE NATURE OF	· · · · · · · · · · · · · · · · · · ·			
TYPE OF SUBMISSION	PE OF ACTION					
Notice of Intent  X Subsequent Report  Final Abandonment Notice  13. Describe Proposed or Completed Operation (clearl If the proposal is to deepen directionally or recommend Attach the Bond under which the work will be perfollowing completion of the involved operations, testing has been completed. Final Abandonment determined that the final site is ready for final inspe	plete horizontally, give a rformed or provide the If the operation results Notices shall be filed o	ails, including estimated start subsurface locations and me Bond No. on file with BLM in a multiple completion or	asured and true vertice I/BIA. Required sub- recompletion in a nev	Abandon  al  osed work and a cal depths of all sequent reports v interval, a For	pertinent markers and zone shall be filed within 30 day m 3160-4 shall be filed onc	
PRODUCED WATER FROM THIS WELLBORE FIBERGIASS STORAGE TANK, HAULED I AND TAKEN TO PUBLIC DISPOSAL FACT	BY CHOICE OILFIE	ELD SERVICE COMPANY	₽e SFE	Ject ATTACHI DITIONS	1	
14. I hereby certify that the foregoing is true and correct		Title				
Name (Printed/Typed)  KAYE MC COMMICK (	•		ארו ב בספיר וחפיריני			
AMIR MUNICIANINI	1		OD & REG TECH			
- July - Colline	R SPACE FOR FE	Date 04-29-2		<u> </u>		
Approved by	S SPACE FUR FE	Title	TICE USE	Date		
Conditions of approval, if any, are attached. Approval	of this notice does not			Date		
certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to	o those rights in the su	bject lease				

Information needed for the authorization for the disposal of produced water off lease;

- 1. Provide this office a copy of Underground Injection Control Permit issued to the operator of the injection well to include the OCD Permit number.
- 2. How much water is produced and from what formation.
- 3. Provide a water analysis of the produced water.
- 4. Provide the legal land description of the disposal facility.
- 5. If there is an alternate disposal facility, provide the same information

If you have any questions, please contact Jim Amos at 575-234-5909

5/18/08