CASES NO. 12771/12771A

Note to file: The attached documentation, as it relates to the following described well operated by Tenison Oil Company of Abline, Texas, pertains to the matter heard in this cause and is hereby made a part of the official record. Please do not remove from the case file by order of the examiner.

MICHAEL E. STOGNER

EXAMINER

Date: March 3, 2005

(1) Vaughn "B-9" Well No. 1 (API No. 30-025-09522), located 330 feet from the North and East lines (Unit A) of Section 9, Township 24 South, Range 36 East, NMPM, Lea County, New Mexico.

ONGARD 02/21/05 16:36:17
C105-WELL COMPLETION OR RECOMP CASING LOG 0GOMES -TPFE ONGARD CMD : OGECLOG

OGRID Identifie: : 22247 TENISON OIL CO Prop Identifier : 10868 VAUGHN B 9 API Well Identifier : 30 25 9522

Well No : 001

Surface Locn - UL : A Sec : 9 Twp : 24S Range : 36E Tot Idn :

Multple comp (S/M/C): S TVD Depth (Feet): 3662 MVD Depth (Feet): 3662

Spud Date : 06-01-1954 F/A Date : 01-21-2002

Casing/Linear Resors:

S Size Grade Weight Depth(ft) Depth(ft) Hole Size Cement --- TCC ----(inches) (ib/ft) Top-Liner Bot-Liner (incres) (Sacks) (feet) Code

E0004: No matching record tound. Enter data to create.

PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05 PF05 CONFIRM PF07 PF38 PF09 COMMENT PF10 TLOG PF11 PF12

CMD: ONGARD INQUIRE WELL COMPLETIONS OG6IWCM

02/21/05 16:36:25 OGOMES - TPFE

API Well No : 30 25 9522 Eff Date : 01-21-2002 WC Status : P

Pool Ida : 33820 JALMAT; TAN-YATES-7 RVRS (OIL)

OGRID Idn : 22247 TENISON OIL CO Prop Idn : 10868 VAUGHN B 9

Well No : 001 GL Elevation: 99999

U/L Sec Township Range North/South East/Nest Prop/Act(P/A)

B.H. Locn : A 9 24S 36E FTG 330 F N FTG 330 F E P

Lot Identifier: Dedicated Acre: Lease Type : F

Type of consolidation (Comm, Unit, Forced Pooling - C/U/F/O) :

M0025: Enter PF keys to scroll

PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05 PF06
PF07 PF08 PF09 PF10 NEXT-WC FF11 HISTORY PF12 NXTREC ·PF07

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Status Dt	Prmt App	Spudded 06/01/1954	TD Rchd Cmpltd: 12/31/9999		1st Prod	1st Inj PB Dt	Plug Pln P/A 01/21/2002	Measured TVD		3662	0		
Q.	0	S S		A	•		P 8/13/2004		PERMIT	Hole	Loggers		
Status	Туре	Category	WI Permit	Orig WI Type	Orig Cat		Mod Di:	Multi- Lateral?	Const	District 01	H2S Present?		
			Well No 001									iewing/editingl	
2 00 00								• • • • • • • • • • • • • • • • • • • •				expand the comment field for viewing editing.	
30 025 09522	TENISON OIL CO	Orig Op Driller	VAUGHN B 9	VAUGHN B 9					Master Well File Comments			<f2> will</f2>	
API Well#	Operator	Orig Op Driller	Well Nm	Field Nm	Basin,	Deep Frm			Master Well	55		-Shiff>+	

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Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

N.M. Oil Cons. Division bureau No. 1004-0135 1625 N. French Dr. Expires: March 31, 1993

BUREAU OF	CAND MANAGEMENT			ation and Scripl No.
	H	obbs, NM 88 <u>24</u>		
Do not use this form for proposals to di	AND REPORTS ON WELLS rill or to deepen or reentry to a d R PERMIT—" for such proposals	ifferent reservoir.	If Indian, All	ottee or Tribe Name
	TIN TRIPLICATE	7.	If Unit or C	A, Agreement Designation
1. Type of Well Oil Gas Pro ***		-	Well Name an	d No.
Oil Well Well Other 2. Name of Operator		1	aughn B	
Tenison Oil Company			API Well No.	
3. Address and Telephone No.			0025095	22 0051 ~
401 Cypress #500, Abilene, TX	79601			ol, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey D	escription)	L	almat	
330' FNL & 330' FEL Sec. 9, T-24-S, R-36-E		1_	County or Pa	rish, State
CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF			ER DATA
TYPE OF SUBMISSION		TYPE OF ACTION		
Notice of latent	Abandonment		Change of	Plans
THE OF THE STATE O	Recompletion	Į	New Coast	
Subsequent Report	Plugging Back	[Non-Routi	ne Fracturing
.	Casing Repair	Ĺ	Water Shut	-Off
Final Abandonment Notice	Altering Casing	Į.	-	to Injection
	Other			rater eks of multiple completion on Well completion Report and Log form.)
01-18-02 Set 5-1/2" CIBP @ 325 01-18-02 Mix mud & circulate. 01-19-02 Cut 5-1/2" csg. @ 145 01-19-02 Spot 40 sx cmt. @ 150 01-21-02 Tag plug @ 1317'. 01-21-02 Spot 15 sx cmt. from 01-21-02 Install dry hole mark	50'. 00'. 35' to surface.	mpballel, tag e	. (202	
	Approved as to publish under to publish under to publish electoral and the publish and the pub	olugging of the walk biggs. India of graphic walk biggs. In the control of the walk biggs.	N	
14. I hereby certify that the foregoing is true and correct	A =====		% _Q.,	01/22/02
Signed Signed	Title Agent		Daté	01/22/02
Approved by (DRIG SGD.) DAVID R. Conditions of special sections.	ALASS Title		Date	
FEB 1 1 2002				
Trite 18 U.S.C. Section 1001, makes it a crime for any person or representations as to any manor within its furisdiction.			s any false, fic	citious or fraudulent statements
PETROL FUM ENGINESO	*See Instruction on Reverse	Side		~ /

*See Instruction on Reverse Side

PETROLEUM ENGINEER



NEW MEXICO ENERGY, MITERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON
Governor
Jennifer A. Salisbury
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

September 8, 2000

22247 TENISON OIL CO 401 CYPRESS ST STE 500 ABILENE, TX 79601

Re: Current Status of Oil and Gas Wells

In May of this year, the Oil Conservation Division ("Division") sent a letter to you setting forth the Division's information on wells for which you are the operator of record. The letter requested a response with additional information. The Division has had no response to the letter. The Division presumes you agree with the information in the letter regarding your inactive wells.

The wells have not shown production or been reported on Form C-115 for more than one year. The wells are not in compliance with the Division's rules and the New Mexico Oil and Gas Act.

You are hereby directed to bring these wells into compliance within 60 days. In the alternative, within 30 days you may submit a compliance plan including a schedule of activities with dates.

Sincerely,

Chris Williams
District Supervisor

:	CERTIFIED M (Domestic Mail)	ce AIL RECEIPT Only: No Insuran	ce Coverage Provided)	
7. 5.5.5.	Article Sent To:	N OIL	Co	
Ф Б	Postage	\$.33	S NW 88240	
9.7	Certified Fee	1.40	D SEP 13 Postmerk	-
 	Return Receipt Fee (Endorsement Required)	1.25	n Men	
	Restricted Delivery Fee (Endorsement Required)	1 2 60	USPS	il .
7	Total Postage & Fees	\$ 2,78	NOISING TON	
er ann a chairt seal eile ann an	Name (Please Print Cle		by mailer)	
HFI	Street, App No.; or PO		DRIVE	
	City, State, 2010 state of			
	PS Form 3800, July 1	999	See Reverse for Instruction	5 (

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	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A Received by (Please Print Clearly) A. Received by (Please Print Clearly) C. Signature X. A. J. L. A. J. L. A. J. A.
. {	1. Article Addressed to:	D. Is delivery address different from item 1? Yes
1	300	If YES, enter delivery address below: No
-{	22247	MALO
1	TENISON OIL CO	A MALIN ON
1	401 CYPRESS ST	(Sep 12)
1	STE 500	2 Comba 2 02 157
	ABILENE, TX 79601	3. Service Type Certified Mail Registered Insured Mail C.O.D.
12	Article Atember Co.	4. Restricted Delivery? (Extra Fee)
L	Article Number (Copy from service label) 7099 3220 000) S Form 3811, July 1999 Prometic Park	9918 119655
١.	Domestic Retur	rn Receipt 102595-00-M-0952

Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

1625 N. French Dr. FORM APPROVED Budget Bureau No. 1004-0135

Hobbs, NM 88240 Expires: March 31, 1993 5. Lease Designation and Serial No.

LC 030467B SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 1. Type of Well Oil Well Gas Well 8. Well Name and No. Vaughn B-9 #1 2. Name of Operator 9. API Well No. Tenison Oil Company 30025095220031--- 3. Address and Telephone No. 10. Field and Pool, or Exploratory Area 401 Cypress St., #500, Abilene, Tx. 79601 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) **Jalmat** 11. County or Parish, State 330' FNL, 330' FEL Section 9, Township 24S, Range 36E Lea, New Mexico CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12. TYPE OF SUBMISSION TYPE OF ACTION Abandonment Notice of Intent Change of Plans Recompletion New Construction Subsequent Report Non-Routine Fracturing Plugging Back Water Shut-Off Casing Repair Final Abandonment Notice Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* Set plug @ 3490' in 5 1/2" csg. Put in 35' of Cement. Set plug @ 1490' in 8 5/8" csg. Put in 35' of cement. 1 TAG @ 100 Ft cmt . straddle A+ Set plug @ 35' 12 1/2" csg. Put in 35' of cement. Shoe depth. Title Vice President, Administration Approved OHIG. SGD.) GARY GOLIRLE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent state

Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

nergy, Minerals and Natural Resources Depar nt

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87410 I.						ND AUTI					
Operator		IO IIIA	1401 0	21 11 OIL	LAND	11/1/10/10	ne ur	Well	API No. 0-025-09	522	
Tenison Oil Company											
8140 Wallnut Hill Ln	. #601	- Hous	ton,	Texas	7523						
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Oil Casinghe	Change in	Dry Gas		E	Other (Plea	-				
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASF									
Lease Name Vaughn B-9		Well No.				ation Yates 7	Rive	l _	of Lease FED Federal or Fee		ease No. 2436
Location Unit LetterA	:3	30	Feet Fro	m The	North	_ Line and _	330) Fo	et From The	East	Line
Section 9 Township	248		Range	36E		, NMPM,	1	ea			County
III. DESIGNATION OF TRAN	SPORTE	R OF OI	I. ANT	NATI	RAL G	:AS					
Name of Authorized Transporter of Oil	ΙXΠ	or Conden	sale		Addres	(Give addre			copy of this fo		nt)
Enron Oil Trading & Name of Authorized Transporter of Casing	Transpo	ortatio Transc	n Co.						exas 772 Copy of this fo		mt) 76102
Sid Richardson Carbo	n & Fef	POCHIOS	Cor a	ηβ,∟: 3	1				201 Main		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	ls gas a	ctually conne	cted?	When			
If this production is commingled with that i	rom any oth	er lease or p		36E comming	ling order	Yes number:			UnKnow	n	
IV. COMPLETION DATA		Oil Well	G	s Well	New '	Weil Work	over	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion Date Spudded		pl. Ready to			Total D	enth	l		I I	<u></u>	.1
Date Spikited	Date Com	рі. Келіў ш	riou.		, 0.2.1	-pu			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing For	mation		Top Oil	/Gas Pay			Tubing Dept	h	
Perforations					·				Depth Casing	Shoe	
					CEME	NTING RI	ECORI)	· · · · · · · · · · · · · · · · · · ·		
HOLE SIZE	CA	SING & TU	BING SI	ZE	ļ	DEPT	H SET		s	ACKS CEME	NT
					ļ				 -	 ·	
V. TEST DATA AND REQUES	T FOR A	LLOWA	RLE.		L				<u> </u>		
OIL WELL (Test must be after re				and must	be equal	so or exceed	top allov	vable for this	depth or be fo	or full 24 hour.	s.)
Date First New Oil Run To Tank	Date of Te	st			Producir	ng Method (F	low, pun	rp, gas lift, e	tc.)		
Length of Test	Tubing Pre	SSUPE			Casing I	ressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water -	Bbls.			Gas- MCF		
GAS WELL	<u> </u>				<u> </u>				I		
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Co	ndensate/MN	<i>ICF</i>	····	Gravity of Co	ondensate	
Testing Method (pitot, back pr.)	Tubing Pre	ssure (Shut-i	n)		Casing F	ressure (Shu	t-io)		Choke Size		
VI. OPERATOR CERTIFICA	TE OF	COMPL	JANC	Œ							
I hereby certify that the rules and regular	ions of the	Oil Conserva	tion			OIL C	CON	SERVA	ATION E	DIVISIO	N
Division have been complied with and the is true and complete to the best of my kg			above		_	_4_ 4 -			- 1 · · · · · · · · · · · · · · · · · ·	30	
QH 16!		7			ט וו	ate Appı		ıg. Signe	d bw		
Signature	5/.				B,	,	1	Paul Kai	ıt a		
Signature Robert B. Tenison Jr	Mana	iger- Ma		ing		,		Geologie	2 / J		
Printed Name	(214)	363-50	Fitle 205 2006 No.		Ti	tle					·

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.

Submit 5 Copies
Appropriate Pistrict Office
DISTRICT I
P.O. Bez 1980, Hobbs, NM 88240

State of New Mexico nergy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87410	REO	UESTE	ÔR A	i I OWAF	BLE AND	ALİTHOR	IZATION			
1.					AND NA					
Operator								API No.		
Tenison Oil	Compan	<u>Y</u>					30	-025-0	9522	
Address 8140 Walnut 1	Hill L	ane #	601	- Dall	las, Te	xas 75	5231			
Reason(s) for Filing (Check proper box)	······································					er (Please exp	lain)		·····	
New Weil		Change in	Transp	orter of:						
Recompletion	Oil	<u></u>	Dry G	_	EF	FECTIVE	- يا <u>::</u>	1-89		1
Change in Operator XXX	Casinghe	ad Gao	Conde	nsate						
If change of operator give name and address of previous operator			as C	orp	- 4849	Greenvi	ille Av	e. #10	00 - Da	11as, TX 75206
II. DESCRIPTION OF WELL	AND LE		Talle			7 63-	10 md 10 1	(TOTAL .	
Lease Name Vaughn B-9		1	L		ing Formation Cansill		7ers Kind State,	Federal or Fe		2436
Location					•					
Unit Letter A	. 33	0	Feet F	rom The	North Lin	e and33	30F	et From The	East	Line
Section 9 Townsh	ip 24	S	Range		36E ,N	MPM, L∈	ea	_		County
III. DESIGNATION OF TRAI				D NATU			13.1			
Name of Authorized Transporter of Oil	<u>×x</u>	or Conde	13465		1				form is to be se	
Shell Pipelii Name of Authorized Transporter of Casin		KXI	or Dry	Gas [77253-3 form is to be se	
El Paso Natu	·		U. Diy	·	1 -				79978 - 1	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge	is gas actuali		When		13310-1	.432
give location of tanks.	i A	<u>j</u> 9	245	36E		Ye	es i Un	known.		
If this production is commingled with that IV. COMPLETION DATA	from any ot	her lease or	pool, giv	ve comming)	ing order numb	ber:				
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spaniced	Date Com	pl. Ready to	Prod.		Total Depth	<u> </u>	************	P.B.T.D.	·	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Oil/Gas I	Pay		Tubing Dep	xh				
Perforations					L		,	Depth Casia	ng Shoe	
		TIDING	CASE	NC AND	CEMENTI	NC PECOE		<u> </u>		
HOLE SIZE		SING & TI			CEMENTI	DEPTH SET		Υ	SACKS CEME	-NT
11000 0100	- U			J.L		DEI 111 OE1		 	ONONO OLIM	
V. TEST DATA AND REQUE	ST FOR	ALLOW.	ARIE		<u> </u>					
OIL WELL (Test must be after t				oil and must	be equal to or	exceed top all	owable for this	depth or be	for full 24 hour	v. .)
Date First New Oil Run To Tank	Date of Te	· · · · · · · · · · · · · · · · · · ·	<u> </u>			thod (Flow, p			· · · · · · · · · · · · · · · · · · ·	
Length of Test	Tubing Pr	essure			Casing Pressu	ire		Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF		
GAS WELL	<u> </u>				L			<u> </u>		
Actual Prod. Test - MCF/D	Length of	Test			Bbis. Conden	sate/MMCF		Gravity of C	Condensate	
Testing Method (pinnt, back pr.)	Tubing Pr	essure (Shut	-in)		Casing Pressu	ire (Shut-in)	# * * * * * * * * * * * * * * * * * * *	Choke Size	·	
					<u> </u>					
VI. OPERATOR CERTIFIC	_			ICE	l c	OIL COM	ISERV	MOITA	DIVISIO	M
I hereby certify that the rules and regu					-	ارات کارا				41.4
Division have been complied with and is true and complete to the best of my			en above	:		_		JUL 1	7 1990	
		,			Date	Approve				
1/8 pm (11.	lack				_	c	RIGINAL C	tagana nu	t sair i	
Signature					∥ By		Distr	BCT LEAD	JURKY SLX	10N
Bruce C. Macke	, Produ	iction		·					ERADOR	
Printed Name		214-	Тіце 363 —	5005	Title.				·	
Date			phone N							

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
- 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.

Ormeric 9-3319 DEPARTMEN OF THE INTERIOR Verse side: BUREAU OF LAND MANAGEMENT	NMLC030467B
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 PERMIT." for such proposals.)	8 IF INDIAN, ALLOTTER OR THIRE PAGE
	7. UNIT AGREEMENT NAME
NAME OF OPERATOR	8. FARM ON LEASE NAME
Triton Oil & Gas Corp.	Vaughn B- 9
Drawer V - Freer, Texas 78357 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below) At surface	Jalmat Tansill Yate Seven Rivers 11. 38C, T, E, M, OR BLK, AND BURNEY OR AREA
NENE, 330' FNL and 330' FEL	Sec. 9, T24S, R36E
Unknown 3392 GR	Lea NM
Check Appropriate Box To Indicate Nature of Notice, Report,	, or Other Data
NOTICE OF INTENTION TO:	CESEQUENT EMPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZIN	BEPAIRING WELL ALTERING CASING ABANDONMENT ⁶
HEPAIR WELL CHANGE PLANS (Other) Operator Change (Discribe proposed for complete operations (Clearly state all pertinent details, and give pertinent proposed work. If well is directionally drilled, give subsurface locations and measured and true nent to this work.)*	results of multiple completion on Well ecompletion Report and Log form.) dates, including estimated date of starting an vertical depths for all markers and zones perti-
Change of operator from: Worldwide Energy Cor	poration
to: Triton Oil & Gas Cor	p.
JUNE effective November 1, 198	
mk	
ACCENTED FOR	FECOND S FE
79310	CEIVE
CARLSBAD NES	
CARLSBAD NES	
CARLSBAD NEA I hereby certify that the foregoing is true and correct SIGNED A CHARLES D'ANGE TITLE Sr. Prod. Tech	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

*See Instructions on Reverse Side

NO. OF COPIES RECEIVED							•
DISTRIBUTION		NEW	MEXICO OIL CONSER	VATION COMMISSIO	N	Form C-101 Revised 1-1-6	20
SANTA FE		· ·			-		Type of Lease
FILE		4				STATE	
U.S.G.S. LAND OFFICE	 	1					& Gas Lease No.
OPERATOR	 	1			•	N	
OF ERAT OR		J				THITT	THI THING
APPLICAT	ION FO	R PERMIT TO	DRILL, DEEPEN, C	R PLUG BACK	····		
in. Type of Work						7. Unit Agre	pement Nume
Doub t			DEEPEN	PLIE	BACK XX	Vaughn '	B-9
b. Type of Well	لــا		DEEPEN [_]	PLUG	BACK E	8. Form or L	.ease Name
OIL X GAS WELL		OTHER		INGLE MU	ZOME		
2. Name of Operator						9. Well No.	
Triton Oil	& Ga	s COrp.	·				*
3. Address of Operator 48	349 Gr	enville Ave	nue				od Pool, or Wildcat
Suite 1000), Two	Energy Squ	are, Dallas, TX	75206		Jaim	at-Yates
4. Location of Well UNIT LI	ETTER		ATED 330 FE	ET FROM THE NOTT	LINE	IIIIII	
330		East	9	24~S	36E	IIIIII	
AND PEET FO	OM THE	THIRTH LINE			17777777	12, County	
						Lea	
	HHH	HHHHH	HHHHHH	HHHHH	HHHH	mm	HHHHmm
HHHHHH	HHH	*****	4444	. Proposed Depth	19A. Formatio	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	20. Rotory or C.T.
				PB 3440'	Yates	}	WO Unit
21. Elevations (Show whether		tc.) 21A. Kind	& Status Plug. Bond 21	B. Drilling Contractor		22. Approx	L. Date Work will start
3392' Ground Le	vel	Blank	et-Active	Not yet chos	sen] 1	L-5-89
23.		P	ROPOSED CASING AND	CEMENT PROGRAM			
SIZE OF HOLE	SIZ	E OF CASING	WEIGHT PER FOOT	SETTING DEPTH	I SACKS OF	F CEMENT	EST. TOP
Surface casing	Da	ata NA					
NA		5-1/2"	NA	3591'	N	Α	3142'
Well is non econ	omic s	with product	ion perforation	e from 3545) i	1 25051	in Towar	: : Votos - Duidus
plug set at 3586			ron berroracton	2 TIOM 3545	2303	TH DOME	Yates. Bridge
Proposed Workove		, _, _ 00g.					
1. Pull rods, t		and plump.					•
			set at 3586' t	0.31001			
			w log indicated		ne. Pres	ent esti	mate is at
34346 to 34	34' ot	verall. Pro	duction formati	on will be Upr	er Yates		mace is at
5. Acid wash pe	rforat	ions with 5	00 gallons.			•	
			for improved p	roduction rate	∍.		
 Put well on 							
NOTE: Exact det	ails o	of workover	will be reporte	d on Form C-10)3.		
			•			*	
IN ABOVE SPACE DESCRIBE	PROPOS	ED PROGRAM: IF	PROPOSAL IS TO DEEPEN OR	PLUG BACK, GIVE DATA	ON PRESENT PR	ODUCTIVE ZONI	E AND PROPOSED NEW PRODUC
I hereby certify that the inform	netion abo	re is true and com	olete to the best of my kn	owledge and belief.	· <u>-</u>		
				_	lan.	12-1	.6-88
Signed MAN	pho	du	Tule	Engineering M	gr.	Date	
(This space	for State	Use)				.	
ORIGINA	al sign	ed by Jerby Sex	CTON			しとじ	2 2 1988
APPROVED BY	PISTRICT	I SUPERVISOR	TITLE			DATE	1000
			~~ 				

CONDITIONS OF APPROVAL, IF ANY:

Or and Mary Party Constitution

October 27, 1988

(Date)

DIE CONSERVATION DIVIS P. O. BOX 2088

7 IL F	SANTA FE, NE	W MEXICO 87501	
LAND OFFICE	REQUEST FO	DR ALLOWABLE	
UPERATOR PACALION OFFICE		AND SPORT OIL AND NATURAL GAS	
Operator	c Corp	*	
Triton Oil & Ga			
4849 Greenville Reason(s) for filing (Check proper bas	Avenue #1000 - Dallas, 1	Texas 75206 (Drawer V -	Freer, TX 78357)
New Well	Change in Transporter of:	755	N 1 1000
Recompletion Change in Ownership	Casinghead Gas Conde	<u> </u>	November 1, 1988
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		
Vaughn B-9	Well No. Pool Name, Including F		LC 030467B Lease No. A 092436
Location			TOUGHT IN OVERAU
Unit Letter A : 33	Feet From The North Lin	ne and 330 Feet From	The East
Line of Section 9 To	waship 24S Range	36E . NMPM.	Lea County
	TER OF OIL AND NATURAL GA		
Name of Authorized Transporter of Ct. Shell Pipeline	or Condensate	Andress (Give address to which appro-	
Name of Authorized Transporter of Ca		Address (Give address to which appro	ved copy of this form is to be sent)
El Paso Natural	Gas Co. Unit Sec. Twp. Rge.	Box 1492 - El Paso	
If well produces oil or liquids, give location of tanks.	A 9 24S 36E	Yes	Exact date unknown
If this production is commingled wi	th that from any other lease or pool,	give commingling order number: New Well Workover Deepen	Plug Back Same Res'v, Diff Ros'v,
Designate Type of Completion			,
Date Spudded .	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations		,	Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		<u> </u>	<u> </u>
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow
OIL WELL Date Fire: New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(i, eic.)
Length of Test	Tublog Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gde-MCF
	L		
GAS WELL Actual Frod. Teel-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Sixe
CERTIFICATE OF COMPLIANO	2E	OIL CONSERVAT	TION DIVISION
	0.1 6	APPROVED	1988
livision have been complied with		Orig.	Signed by
bove in true and complete to the	Dear of my Anowieuge and Dellet.	Pa G	Il Kautz
$\omega \sim$		11166	compliance with HULE 1104.
11 Orolien	Nance	If this is a request for allow	able for a nawly drilled or despens
Sr. Prod. Tech.	(512-394-7974)	tests taken on the well in accor	
SI. FIOU. Tech.		All sections of this form mu	at be filled out completely for allou-

Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transporter, or other such change of conditio Separate Forms C-104 must be filed for each pool in multip LIND MINISTRALS GEPARIMENT

CONTINUATION

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LUS.

AND OFFICE

MANIPONIEN

OLL

MANIPONIEN

OLL

TIL CONSERVATION DIVISION P. O. HO X 2038 SANTA FE, NEW AEXICO 87501

REQUEST FOR ALLOWABLE

	PERATOR PARATION OPENIX Uperdur	AUTHORIZAT	TION TO TRANS	AND SPORT OIL	AND HATUR	AL GAS			
	Triton Oil & Cas	s Corp.	_		•				
	4849 Greenville	Avanue #1000	- Dallac T	ovac 75	206				
	Reason(s) for filing (Check proper bo	x) Change in Tran Cil	naporter of: Dry G		Other (Please		vember 1,	1988	
	Charge in Ownership	Casinghead Ga	Conde	nsale [····			
	If change of ownership give name and address of previous owner								
	DESCRIPTION OF WELL AND		Name, Including F	ormation		Kind of Leas	F 10 000		i ase No.
	Vaughn B-9	1 1 .	lmat Tansil				LC 0304	ral	A 092436
		30 Feet From The	North L	ne and	330	Feet From	The <u>East</u>		*
	Line of Section 9 To	ownship 24S	Range	36E	, NMPM,		Lea		County
I.	DESIGNATION OF TRANSPOR					,-,		,	
	Name of Authorized Transporter of Of Enron Oil Tradin			i i			oed copy of this	_	
	Name of Authorized Transporter of Ca	isinghead Gas 🔯 🛛 o	or Dry Gas	1			on, TX 77 ved copy of this		
	El Paso Natural		Twp. Rge.		Box 1492		so. TX 79	978-14	192
	give location of tanks.	; A ; 9 ;	24S 36E	Yes			Exact date	unkno	wn .
٠.	If this production is commingled win COMPLETION DATA	ith that from any oth		New Well		Deepen	7.50 - 5 - 4 - 10		
	Designate Type of Completi-		Gas well	iven well	Harzover	Deepen I	Plug Back	oame Hez.	v. Dill. Resta
•	Date Spudded	Date Compt. Ready	to Prod.	Total Dept	h		P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing F	Formation	Top Oil/Go	os Pay		Tubing Depth	· · · · · · · · · · · · · · · · · · ·	
	Perforations	1					Depth Casing	Shoe	
		TUBIN	IG, CASING, ANI	D CEMENTI	NG RECORD		1		
	HOLE SIZE	CASING & TE	UBING SIZE		DEPTH SET		SAC	KS CEM	ENT
		 		<u> </u>			 		·
٠.	TEST DATA AND REQUEST F	OR ALLOWABLE	(Test must be a able for this de			of load oil	and must be equ	al to or es	sceed top allow
ĺ	Date First New Oil Run To Tanks	Date of Test		Producing	Method (Flow,	pump, gas lif	i, eic.)		
	Length of Test	Tubing Pressure		Casing Pre	етие		Choke Size		
	Actual Prod. During Test	OII-Bbls.		Water - Bala	··		Gas-MCF		
•		<u> </u>		.t			. 		
ſ	GAS WELL Actual Prod. Teel-MCF/D	Length of Test		Bbie. Cond	enagte/MMCF		Gravity of Con	ndeneate	
	Teeting Method (pilot, back pr.)	Tubing Pressure (Sh	nt-io)	Cosing Pre-	sew. (sbut-i	n)	Choke Size		
į. (CERTIFICATE OF COMPLIANCE	CE			OIL COI	VŞERVAT	ion Divisio	ON.	
1	hereby certify that the rules and r Division have been complied with above is true and complete to the	and that the inform	nation given	APPROV	/ED ORIGI		ED BY JERRY !		19
			İ	TITLE_					
-	Sr. Prod. Tech.	512-394	-7974	If the well, this tests tak	is is a requer form must b on on the we sections of th	of for allows accompan Il in accord In form mus	omplience with able for a new led by a tabul lance with MU it be filled out	ly drilled ation of LE 111.	i or deepene the deviatio
~~	(Int. //-/	(*) /-//8 e)		Fill well nam	e or number, c	tions I, II. or transports	ile. III, and VI for, or other auch be filed for	p cyeves	of condition

OSTRIBUTION FAFE C.S. NO OFFICE IAMSPORTER CAB PERATOR

P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

					
Triton Oil	& Gas Corp.				
.ddress		·			
4849 Greenv	ille Avenue #1000 - Dalla	S, Texas 75206		- 	·
Vew Well	Change in Transporter of:	Omer (Freus	e explain;		
Recompistion	Oli Dry G	Effecti	ve 5/31/8	8	
Change in Ownership	Casinghead Gas Conde	ensate 🔲			
change of ownership give name address of previous owner	Worldwide Energy Co	rporation - Draw	er V - Fr	er, Texas 783	57
DESCRIPTION OF WELL AND			·		
Lesse Name Vaucha R. O	Well No. Pool Name, Including i	_	Kind of Lease State, Federal	LC 030467B	Lease No.
Vaughn B-9	l Jalmat Tansill	Yates 7 Rivers	L dicto, r ducido	Federal	A 092436
Unit Letter A : 33	Feet From The North Li	ne and330	Feet From T	he <u>East</u>	
Line of Section 9 To	wnship 24S Range	36E , NMPM	· Tu	ea	County
	TER OF OIL AND NATURAL G	AS			
Nume of Authorized Transporter of O.	or Condensate	Address (Give address	to which approv	ed copy of this form is to	o be sent)
Shell Oil Company Y	singhead Gas (N) or Dry Gas (7)	P. O. Box 31	05 - Houst	on. Texas 772	53-3105
El Paso Natural Gas		j		iso. Texas 799	
If we'll produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connect	ed? Whe	n	70-1472
give location of tanks.	<u> </u>		, 		
I this production is commingled wi	th that from any other lease or pool,	give commingling order	number:		
Designate Type of Completi	On (X)	New Well Workover	Deepen	Plug Back Same Res	v. Dill. Reats
Date Spudded	Date Campl. 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	
Perforduciona	<u>, </u>			Depth Casing Shoe	
	TUBING, CASING, AN	D CEMENTING RECOR	D		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	ZT	SACKS CEM	ENT
	 	 			
	 	 			
		<u> </u>			· · · · · · · · · · · · · · · · · · ·
FEST DATA AND REQUEST F		fer recovery of socal value		nd must be equal to or ex	sceed top allow
OIL WELL. Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow		, e(c.)	
Length of Teet	Tubing Pressure	Casing Pressure	-	Choke Size	
Actual Prod. During Test	Oli-Bbis.	Water-Bble.		Gos · MCF	
GAS WELL				······································	
Actual Prod. Teel-MCF/D	Length of Test	Bbis. Condensate/MMCF		Gravity of Condensate	
Teeting Method (pitot, back pr.)	Tubing Pressure (Shat-in)	Casing Pressure (Shut-	-in)	Choke Size	
		<u> </u>			
ERTIFICATE OF COMPLIANC	Œ	OIL CO		ON DIVISION	•
hereby certify that the rules and t	egulations of the Oil Conservation	APPROVED	duit	J 16899	9
ivision have been complied with	and that the information given beat of my knowledge and belief.	BYBrger	At steaman	Lancard and	
, ove 12 1/10 = 110 to mpreto to the			2 - 3, 4, 1, 1 + 27		
0 .	,	TITLE			
A Villania Radi	11.0 2	11		mpliance with RULE ble for a newly drilled	
(Signa	(we)		be accompani	ed by a tabulation of	
Prod. Analyst		All sections of	this form must	be filled out complet	aly for allow
(Tie	(*)	able on new and rec	ompleted well	4.	
6/14/88 (Da	(e)			III, and VI for change, or other such change	
·		Separate Forms	C-104 must	be filed for each poo	in multipl

Form	9-331
(May	1963)

SUBMIT IN TRIPLIC .

Form approved.

(May 1963)	DEPART	MENI OF THE I	NTERIOR	(Other instructions 6 verse side)	5	LEASE DESIGNATION	AND SERIAL NO.	
		GEOLOGICAL SUR				LC 03 0467	В	
	e this form for prop	TICES AND REPO	or plug back to	a different reservoir.	6	. IF INDIAN, ALLOTTE	E OR TRIBE NAME	
	NS OTHER				7	. UNIT AGREEMENT NA	SIE	
2. NAME OF OPER	TOB	,			8	. FARM OR LEASE NAM	ı ic	
	ENERGY CORPO	RATION				VAUGHN B-9		
3. ADDRESS OF OP	ERATOR				9	. WELL NO.		
505 Midla	nd Savings Bu	uilding, Midland,	. Texas 79	97.01		1	· · · · · · · · · · · · · · · · · · ·	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface					1	JALMAT		
330 ft. f	rom North and	i 330 from East	lines of S	Section		1. SEC., T., B., M., OR E SUBVEY OR AREA		
14, PERMIT NO.		15. ELEVATIONS (Show w	hether DF, RT, GR	etc.)	1	2. COUNTY OR PARISH	13. STATE	
		3392' GR				Lea	New Mexico	
16.	Check A	ppropriate Box To Ind	licate Nature	of Notice, Report,	or Oth	er Data		
	NOTICE OF INTE	NTION TO:	1	SUE	SEQUEN	REPORT OF:		
TEST WATER S		PULL OR ALTER CASING MULTIPLE COMPLETE		WATER SHUT-OFF FRACTURE TREATMENT		REPAIRING V		
SHOOT OR ACI	DIZE	ABANDON*	_	SHOOTING OR ACIDIZING	LX_	ABANDONME	1T*	
BEPAIR WELL (Other)		CHANGE PLANS	-			multiple completion on Report and Log for		
17. DESCRIBE PROPERTY OF PROPERTY OF THE PROPE	rk. If well is direct	PERATIONS (Clearly state all ionally drilled, give subsurf	pertinent detai face locations ar	ls, and give pertinent d	ates, inc	luding estimated dat	e of starting any	

Pulled rods and tubing. Set bridging plug at 3586 feet. Perforated 24 feet with 2 holes per foot from 3545 to 3579 feet. Acidized with 500 gals. of MCA. Ran tubing and rods to place on production. Pumped 15 barrels of oil and 275 barrels of water on July 14, 1972.

				•	
18.	I hereby certify that the foregoing is true and correct				
	SIGNED Problem B. Bay	TITLE	Agent	DATE July 22,	1972
	(This space for Federal or State office use)				
	APPROVED BY	TITLE		DATE	

F	orm	9-331
1	Mov	1963)

UNIT STATES SUBMIT IN TRIPLICA (Other Instructions on

Form approved. Budget Bureau No. 42-R1424.

(MHy 1905)	DEPARTMENT OF THE INTERIOR Verse side)					TION AND SERIAL NO.
	G	EOLOGICAL S	URVEY	<u> </u>		67 8
		CES AND REAL TION FOR PERMIT		N WELLS ack to a different reservoir. oposals.)	6. IF INDIAN, ALI	OTTEE OR TRIBE NAME
1.			3°,		7. UNIT AGREEME	NT NAME
WELL GAS WELL	OTHER		\$ j	· ·		
2. NAME OF OPERATOR			;		8. FARM OR LEAS	
3. ADDRESS OF OPERAT	ENERGY COR	TORA I TOR			9. WELL NO.	
505 Midlar	ud Savings I	wilding, Hi	dland, Te	mas 79701	1	
4. LOCATION OF WELL See also space 17 b At surface	(Report location c	early and in accord	ance with any	State requirements.*	10. FIELD AND PO	OL, OR WILDCAT
330 ft. f	rem North a	nd 330 from 1	East line	s of Section	11. SEC., T., R., M SURVEY OR	., OR BLK. AND AREA
					Sec.9, T2	
14. PERMIT NO.		15. ELEVATIONS (SI		RT, GR, etc.)	12. COUNTY OR P	Men Maxica
16.	Check Ar	propriate Box To	Indicate N	ature of Notice, Report, o	r Other Data	
	NOTICE OF INTEN			, , ,	EQUENT REPORT OF:	
TEST WATER SHUT	LONE .	PULL OR ALTER CASIS	10	WATER SHUT-OFF		ING WELL
FRACTURE TREAT		MULTIPLE COMPLETE	"	PRACTURE TREATMENT		ING CASING
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ONMENT*
REPAIR WELL		HANGE PLANS		(Other)		
(Other)				(Note: Report rest Completion or Reco	ılts of multiple comple mpletion Report and L	etion on Well og form.)
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			tisted during the	,,,,,,	,.
18. I hereby certify th	·					
SIGNED	al the sole is	Bay	TITLE	Agent		prii 14, 1972
(This space for Fe	deral or State offi	ce use	mymr to	ADDROV	ED	
CONDITIONS OF	APPROVAL, IF A		TITLE	APPROV	72	
					- LAIN	
		*See	Instructions	On Reverse StateUR R. BR. DISTRICT ENG	INEER	

NO. OF COPIES MECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
I HAND! ON I EN	GA\$			

NEW MEXICO OIL CONSERVATION COMMISS 1

Form C -104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Elioctive 1-1-65
	U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL (•
	LAND OFFICE	7.571.571.571.75	THE ONE OIL MID HATORAL	
	TRANSPORTER OIL . GAS			
	OPERATOR	- -		
I.	Operator			
	Worldwide Energy Cor	poration		
	303 Gulf Building, N	lidland, Texas 79701		
	Reason(s) for filing (Check proper b	Ox.) Change in Transporter of:	Other (Please explain)	
	Recompletion	Ott Dry G	as 🔲	
	Change in Ownership	Casinghead Gas Conde	ensate	
	If change of ownership give name and address of previous owner	Triton Oil & Gas Corp., 2	2310 Republic Bank Tower.	Dallas, Texas, 75201
II.	DESCRIPTION OF WELL AND	D LEASE. Well No.: Pool Name, Including F	Formation Kind of Leas	e Lease No.
	Vaughn B-9		Rivers Tansill State; Feder	\
	Location	20		
	Unit Letter A ; 3	30 Feet From The North Li	ne and 330 Feet From	The East
	Line of Section 9	Township 245 Range 3	6E , NMPM, L	ea County
m.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS Address (Give address to which appro	and come of this form is to be con-
•	Shell Pipe Line Corp		P. O. Box 2648, Housto	
	Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
	If well produces all or liquids, give location of tanks.	Unit Sec. Twp. Rge. A 9 24S 36E	Is gas detually connected? Wh	en
ıv.	If this production is commingled COMPLETION DATA	with that from any other lease or pool,		
	Designate Type of Complet	tion - (X) Oil Weil Gas Well	New Well Workover Deepen	Plug Back Same Restr. Diff. Restv.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
		TIIBING CASING AN	D CEMENTING RECORD	<u> </u>
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			1	
v.	TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a		and must be equal to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	fi, eic.)
•				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bala.	Water - Bbls.	Gae-MCF
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION
		-	APPROVED APR	1 3 1972
		d regulations of the Oil Conservation with and that the information given	Orio	. Signed by
		he best of my knowledge and belief.	BYJoe	D. Ramey
			TITLE	it. I, Supv.
	0,000	\cap	This form is to be filed in	compliance with RULE 1104.
	- Wallet K	J. May	If this is a request for allow	vable for a newly drilled or deepened
	Agent	quature	tests taken on the well in accor	
		Title)	All sections of this form mu shie on new and recompleted we	at be filled out completely for allow-
	February 23, 197		Fill out only Sections I, Il	I, III, and VI for changes of owner, er, or other such change of condition.
	ſ	Date)	Il werr time of number, or transport	other seem energe or constitution.

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.

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL	REQUE	IL CONSERVATION COMMISS! EST FOR ALLOWABLE AND TRANSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-55
1.	OPERATOR PROPATION OFFICE			
	Triton Oil	& Gas Corp.		
	Address 2310 Republ	ic Bank Tower, Dallas	Toyac 75201	
	Reason(s) for filing (Check proper box		Other (Please explain)	
	New Well Recompletion Change in Ownership X	 i	ry Gas Ondensate	
	If change of ownership give name and address of previous owner	Argus Production Co	ompany, 3313 Republic Bank	Tower, Dallas, Texas 75201
11.	DESCRIPTION OF WELL AND	LEASE. Well No.; Pool Name, Includ:	ng Formation Kind of Leas	e Lease No.
	Vaughn B-9	1 Jalmat Yatı	es 7 Rivers TansillState, Federa	Federal A92436
	Unit Letter / A ; 330	Feet From The North	Line and 330 Feet From	The East
	Line of Section 9 Tox	waship 24S Range	36E , NMFM,	Lea County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL	. GAS	
	Name of Authorized Transporter of Ott Shell Pipe Line Con		Address (Give address to which appro Box 2648, Houston,	
	Name of Authorized Transporter of Cas			
	If well produces cil or liquids, give location of tanks.	Unit Sec. Twp. Rge A 9 24S	. is gas actually connected? , Wh	en
ıv	If this production is commingled wit COMPLETION DATA	th that from any other lease or p	ool, give commingling order number:	
•••	Designate Type of Completic	on - (X)	li 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 Oll/Gas Pay	Tubing Depth
	Perforations	<u> </u>		Depth Casing Shoe
		TUBING, CASING.	AND CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE		SACKS CEMENT
v.	TEST DATA AND REQUEST FO		be after recovery of total volume of load oil	and must be equal to or exceed top allow-
	OIL WELL Date First New Cil Run To Tanks	able for the	is depth or be for full 24 hours) Producing Method (Flow, pump, gas li	(i, eic.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bble.	. Water - Bble.	Gds-MCF
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANO	CE	OIL CONSERVA	TION COMMISSION
	I hereby certify that the rules and r Commission have been compiled w above is true and complete to the	ith and that the information giv	ven	And 19
	Dail & Dane		11	compliance with RULE 1104.
	(Signa Chief Engine	nwe) er		nied by a tabulation of the deviation
	(Tit)	le)	7	et be filled out completely for allow-
	March 24, 19		Fill out only Sections I. II	. III, and VI for changes of owner, er, or other such change of condition.

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.

Form 9-331 (May 1963)	U DEPARTM Ge	TRIPLIC TO	5. LEASH DREIDATION AND SERIAL NO. LC 036467B				
(Do not a	SUNDRY NOTES	ES AND REPORT to drill or to deepen or p	S ON WELLS dug back to a different ach proposals.)	reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
OIL WELL	GAS WELL OTHER	***************************************			7. UNIT AGREEMENT NAME		
2. NAME OF OPE		ny			8. FARM OR LEASE NAME VOUG TO BE	_	
3. ADDRESS OF O	_	Bank Tower, Da	line Tevas 75	201	9. WELL NO.		
	WELL (Report location cles	rly and in accordance with			10. FIELD AND POOL, O	R WILDCAT	
330 ft.	from north line	and 330 ft. from	east line of s	ection.	11. SEC., T., E., M., OR SURVEY OR AREA Sec. 9. R2		
14. PERMIT NO.		15. ELEVATIONS (Show wheth			12. COUNTY OR PARISE	18. STATE	
16.	Check App	ropriate Box To Indica	te Nature of Notice	, Report, or O	ther Data	<u> </u>	
	NOTICE OF INTENTI	-	1	•	ENT REPORT OF:		
TEST WATER	SHUT-OFF PU	LL OB ALTER CASING	WATER SH	T-OFF X	- REPAIRING	WELL	
FRACTURE TE		LTIPLE COMPLETE	FRACTURE		ALTERING C	\ 	
SHOOT OR AC	1[ANDON*	SHOOTING (Other)	OR ACIDIZING	ABANDONME	WT*	
(Other)	. (A	ANGE PEANS	(Nor	: Report results	of multiple completion tion Report and Log fo	on Well	
	2. Ron 2 7/	4.4 cu. ft. of ce d top of cement 6" OD tubing, re g water with sho	at 3630 ft. wi	th sand pur and places	mp.	uction.	
	·	•					
					•		
					*		
18. I hereby cert	ify that the foregoing a	TITLE	President		DATE 11/26	5/69	
(This space f	or Federal or State office	use)					
APPROVED :	BY S OF APPROVAL, IF AN	TITLE _	17-11-11-11-11-11-11-11-11-11-11-11-11-1	ACCEPTED	FOR DEPART		
				hen	บระบบกับ		
		*See Instruct	tions on Reverse Sic	U. S. GEOL	1 1969 DGICAL SURVEY I		
				HORBS, I	NEW WEXICO		

Form 9-331 (May 1963)	ا	NITED STATES	SUBMIT IN T	ICATE*	Form approve Budget Bures	ed. 11 No. 42–B1424.
(32.1)			IERIOR verse side)	,	5. LEASE DESIGNATION LC 0304678	AND SERIAL NO.
					6. IF INDIAN, ALLOTTE	OR TRIBE NAME
		ICES AND REPOR	(15 ON WELLS Polug back to a different res Pauch proposals.)	ervoir.		
1.					7. UNIT AGREEMENT NA	MB
OIL GAS WELL WELL						
2. NAME OF OPERATO		_			8. FARM OR LEASE NAI	610
3. ADDRESS OF OPERA	ection Comp	eny		<u>-</u>	Vaugha B-9	· · · · · · · · · · · · · · · · · · ·
3313 Repub	lic National	*	alles, Texas 7520)1	1 3 2 2 3	
See also space 17 At surface	below.)		ith any State requirements.*		10. FIELD AND POOL, O	R WILDCAT
330 It. Iro	m north and	330 R. from eas	it line of Section		11. SEC., T., R., M., OR I SURVEY OR AREA	ELK. AND
					Sec. 9, T248	. AJUE
14. PERMIT NO.		15, ELEVATIONS (Show who	The state of the s		12. COUNTY OR PARISE	New Mexico
		<u> </u>				Men WENTCH
16.	_		cate Nature of Notice, I			
	NOTICE OF INTEN	TION TO:	¬	DOSESUS.	INT REPORT OF:	النتا
TEST WATER SEU		PULL OR ALTER CASING	WATER SHUT-C	·	REPAIRING	(i)
FRACTURE TREAT		MULTIPLE COMPLETE	FRACTURE TRE	ļ	ALTERING C)
SHOOT OR ACIDIZE	[-	ABANDON* CHANGE PLANS	8HOOTING OR (Other)	ACIDIZING	ABANDONME	HT*
(Other)		, IIA GE I DANG	(Note:		of multiple completion tion Report and Log fo	
October 1, to 3590 ft. Propose	l369, to de Indication d:	termine primary : a are that major	Temperature logs source of water is a water source is 3 l-3630 ft. w/ cen	n open ho 1662 ft. t	de interval 36 o 3648 ft.	
	ridg open n	ore section 2002	-3030 IC. W/ Cen	ient aler i	iona mixture.	
	Run tubing,	rods and pump t	to test open hole	section 3	630 ft. to 359	0 ft.
					÷	
					•	
						<i>:</i>
						,
18. I hereby certify t	hat the foregoing h	true and correct				
SIGNED	II WASK	ds TITLE	President	all in	D DATE 11/17	1/69
(This space for F	ederal or State offi	ce use)	ADP	fOA.		
APPROVED BY		TITLE	E Ar	21,1969	DATE	-
CONDITIONS OF	APPROVAL, IF.A		NOV ARTH	IN R BROWN	NN ER	
		*See Instru	uctions on Keyerse Side			
			L			

NO. OF COPIES RECEIVED

REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
AUTHORIZATION TO TRA	AND ANDREW ON AND NATURAL (
- Normanization to the		
<u> </u>		
OFFICE COMPANY		
JION COMPANY		
	Other (Please explain)	
Oll Dry Go	 	
Clara T. Scott & Firs	t National Bank in Da	llas, Trustee under will
-	C. J. C.	Lease No. A92436
Well No. Pool Na		
330 Feet From The North Lin	ne. and 330 Feet From	The East
ownship 24 S Range 3	BE , NMPM, L	ea County
BTER OF OIL AND NATURAL GA	Address (Give address to which appro	ned capy of this form is to be sent)
casinghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
Unit Sec. Twp. Rige.	is gas actually termected? Wh	en
·	give commingling order number:	
	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
		Depth Casing Shoe
	CEMENTING RECORD	
CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		 !
		
FOR ALLOWABLE (Test must be a plan for this do	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil opt or be for full 24 hours) Producing Mothod (Flow, pump, gas lij	
able for this de	pth or be for full 24 hours)	
Date of Test Tubing Pressure	pth or be for full 24 hours) Producing Method (Flow, pump, gas lij Costing Pressure	(t, etc.)
able for this de	psh or be for full 24 hours) Producing Method (Flow, pump, gas lij	it, etc.)
Date of Test Tubing Pressure	pth or be for full 24 hours) Producing Method (Flow, pump, gas lij Costing Pressure	(t, etc.)
Date of Test Tubing Pressure	pth or be for full 24 hours) Producing Method (Flow, pump, gas lij Costing Pressure	(t, etc.)
Date of Test Tubing Pressure Oil - Rbis.	pth or be for full 24 hours) Producing Mothod (Flow, pump, gas li) Cosing Pressure Water-Bhis.	Choke Size Gas-MCF Gas-MCF
Date of Test Tubing Pressure Oil-Ribls. Length of Test	pth or be for full 24 hours) Producing Mothod (Flow, pump, gas li) Costing Pressure Water-Bbls. Bbls. Condensate/MMCF	Choke Size Gas-MCF
Date of Test Tubing Pressure Oil-Ribls. Length of Test	Producing Mothod (Flose, pump, gas lift Cosing Pressure Water - Bbls. Bbls. Condensate/MMCF Cosing Pressure	Choke Size Gas-MCF Gas-MCF
Date of Test Tubing Pressure Oil-Rbis. Length of Test Tubing Pressure	Producing Mothod (Flow, pump, gas li) Cosing Pressure Water - Bbis. Bbls. Condensate/MMCF Casing Pressure	Choke Size Gas-MCF Gravity of Condensate Choke Size
Date of Test Tubing Pressure Oil-Rbls. Length of Test Tubing Pressure NCE.	Producing Mothod (Flose, pump, gas lift Cosing Pressure Water - Bbls. Bbls. Condensate/MMCF Cosing Pressure	Choke Size Gas-MCF Gravity of Condensate Choke Size TION COMMISSION
Date of Test Tubing Pressure Oil-Rbls. Length of Test Tubing Pressure I regulations of the Oil Conservation with and that the information given	Producing Mothod (Flose, pump, gas lift Cosing Pressure Water - Bbls. Bbls. Condensate/MMCF Cosing Pressure	Choke Size Gas-MCF Gravity of Condensate Choke Size TION COMMISSION
Date of Test Tubing Pressure Oil-Rbls. Length of Test Tubing Pressure I regulations of the Oil Conservation with and that the information given	Producing Mothod (Flose, pump, gas lift Costing Pressure) Water - Bbls. Bbls. Condensate/MMCF Costing Pressure OUL CONSERVA APPROVED BY TITLE This form is to be filed in c	Choke Size Gas-MCF Gaveity of Condensate Choke Size TION COMMISSION , 19
Date of Test Tubing Pressure Oil-fibls. Length of Test Tubing Pressure NCE I regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	Producing Mothod (Flose, pump, gas lift Costing Pressure Water-Bbls. Bbls. Condensate/MMCF Costing Pressure OUL CONSERVA APPROVED RY TITLE This form is to be filed in c If this is a request for allow well, this form must be accompany	Choke Size Gas-MCF Gavety of Condensate Choke Size TION COMMISSION , 19 ompliance with RULE 1104, able for a newly drilled or deepened ited by a tabulation of the deviation
Tubing Pressure Oil-Rbis. Length of Test Tubing Pressure Oil-Rbis. Length of Test Tubing Pressure NCE I regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	Producing Mothod (Flose, pump, gas lift Costing Pressure Water Bbls. Bbls. Condensate/MAACF Creating Pressure OUL CONSERVA APPROVED This form is to be filed in c If this is a request for allow well, this form must be accompanies taken on the well in accompaniests taken on the well in accompaniests taken on the storm must	Choke Size Cas-MCF Gas-MCF Choke Size Choke Size Choke Size TION COMMISSION , 19 ompliance with RULE 1104. able for a newly drilled or deepened ided by a tabulation of the deviation dance with RULE 111. It be filled out completely for allow-
Date of Test Tubing Pressure Oil-fibls. Length of Test Tubing Pressure NCE I regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	Producing Mothod (Flose, pump, gas lift Costing Pressure Water-Bbls. Bbls. Condensate/MMCF Costing Pressure OUL CONSERVA APPROVED By TITLE This form is to be filed in c If this is a request for allow well, this form must be accompaniests taken on the well in accompaniests taken on the well in accompanies on new and recompleted well. Fill out Sections 1, II, III,	Choke Size Cas-MCF Gas-MCF Choke Size Choke Size Choke Size TION COMMISSION , 19 ompliance with RULE 1104. able for a newly drilled or deepened ided by a tabulation of the deviation dance with RULE 111. It be filled out completely for allow-
	CTION COMPANY ic National Bank Tower, ox) Change in Transporter of: Oil Dry G. Casinghead Gas Cande Clara T. Scott & Firs Paul P. Scott, Dallas DLEASE 9 Well No. Pool No. 1 Jain 330 Feet From The North Li Township 24 S Range 3 BTER OF OH. AND NATURAL GA DI K or Condensate Line Corporation Casinghead Gas or Dry Gas Line Corporation Casinghead Gas or Dry Gas Well Unit Sec. Typ. Rac. A 9 24 S 36 E with that from any other lease or pool, Cion — (X) Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	AUTHORIZATION TO TRANSPORT OIL AND NATURAL OF COMPANY ic National Bank Tower, Dallas, Texas 75201 ox) Change in Transporter of: Oil Custinghead Gas Condensate Clara T. Scott & First National Bank in Da Paul P. Scott, Dallas, Texas DLEASE Well No. Pool Name, Including Formation I Jalmat Yates 7 Rivers Tan Jalmat Yates 7 Rivers Tan North Line and 330 Feet From The North Line and 330 Feet From The North Line and 330 Feet From The North Line and 330 Feet From The North Line and 330 Feet From The North Line and 36 E, NMFM, L ETTER OF OIL AND NATURAL GAS DI K or Condensate D Address (Give address to which approaching Box 2648, Houston Casinghead Gas D or Dry Gas D Address (Give address to which approaching Address (Give address to which approaching Casinghead Gas D or Dry Gas D Address (Give address to which approaching A

NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

CLARA T. SCOTT AND SIRST	NATIONAL BANK	I ongo 😁		
Company or Operator IN DALLAS, TRUSTEE H-W-O	PAUL P. SCOTT	Lease y	angin 1-9	
Well No. 1 Unit Letter S 9 7	T 255 R 367	Pool Jaluat	· · · · · · · · · · · · · · · · · · ·	
County Kind of Lease	e (State, Fed.	or Patented)_	Pederal	
If well produces oil or condensate, give loca				<u></u>
Authorized Transporter of Oil or Condensat	e Shell	Pipe Line Corpo	ration	
Address Shall Building House	kon 1. Tauna		• •	
Address (Give address to which approved	copy of this	form is to be	sent)	
Authorized Transporter of Gas			,	
A 15			<u>,</u>	-
(Give address to which approved	l copy of this	form is to be	sént)	
If Gas is not being sold, give reasons and al	so explain its	present dispo	sition:	
No gos, or if there is gas, it	is not being	produced in cos	mercial	.
		,		
- quantity.				 .
		ž.		
Reasons for Filing:(Please check proper box	c) New We	11	()	 .* .*-
Change in Transporter of (Gheck One): Oil	X) Dry Gas	() C'head ()	Condensate ()
	•			
Change in Ownership (Remarks:) Other		(
Remarks:	,	Give explanati	on below)	•
15				
Effective date January 1, 1956			٠.	. •
Eliecates date august 1, 1770			je.	
			•	
The undersigned certifies that the Rules and mission have been complied with.	Regulations of	of the Oil Cons	ervation Com-	
Executed this the 2nd day of December	19 55	Para J. S.	CLARA	T. SCOTȚ
		T NATIONAL BANK	IN BALLAS, TRUSTE	Ε, .
•	By_BY-	Macellu	for	Trans.
. 1903		y	ce - Fresident	_
Approved Ull 19	Title			-
OIL CONSERVATION COMMISSION	Company		AND FIRST NATIO	
	Company	% Trust Deparer	TEE. U-W-O PAUL F	_ 50011
By M. Xadel	Address	First National Ba	ank in Dallas	
	- , -	Dallas, Texas		

Title

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

HOBBS OFFICE CCC

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION 0:01 TO TRANSPORT OIL AND NATURAL GAS

Company or Ope	erator ;	olasza a kira	Tangan .		Lease	.	
		•				• • • • •	-
Well No.	Unit	Letter	_ST_	R Poo	ol Jalsa		
County				_	•		
If well produces	s oil or c	ondensate,	give locati	on of tanks:Un	t a S 🤄	T R	Kr.
Authorized Tra							
Address				copy of this for	O. Bidland.	OXES	
Authorized Tra	nsporter	of Gas			·		
Address (Gi				C. Al. : - C			
If Gas is not be:	ve addre	ss to which	approved o	copy of this for	m 18 to be esent dispo	sent)	
		•	•		=		
	N) 288 31		7 (95) <u>4</u> 2 4	a not reme tro	o-ces in co	Section 1	ality.
Reasons for Fil	ling : Plea	ase check pr	oper hox)	New Well			
Change in Tran							, ,)
			O)				
Omange in Franc	sporter q	or (Check On	e): Oil () Dry Gas ()	C nead ()	Condensar	,
				•			
Change in Owne Remarks:				•			
Change in Owne Remarks:	ership		(`)	Other	ve explanat	ion below)	
Change in Owne Remarks:	ership		()	Other (Givenian and Augustian archer 1864)	ve explanat	ion below)	
Change in Owne Remarks:	ership	compliance wi	()	Other (Givenian and Augustian archer 1864)	ve explanat	ion below)	
Change in Owne Remarks:	ership	compliance wi	()	Other (Givenian and Augustian archer 1864)	ve explanat	ion below)	
Change in Owne Remarks:	ership Filed in G	compliance wi	Sh comiss	Other (Given)	ve explanat: :=520 chm _e :	ion below)	_)
Change in Owner Remarks:	ership	compliance wind in the R	Sh comiss	Other (Given)	ve explanat: :=520 chm _e :	ion below)	_)
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Change in Owner Remarks:	ership Tare of or d certifie	coopliance was dead iron to g	() Sh comiss eredal to deliberate and R	Other (Given)	ve explanat: :=520 chm _e :	ion below)	_)
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Change in Owner Remarks: The undersigned mission have be Executed this the Approved	d certifie een comp	es that the R lied with.	ules and R	Other (Given and Augustian Augustia	re explanations -520 characteristics The Oil Cons	ion below)	_)
Change in Owner Remarks: The undersigned mission have be Executed this the Approved OIL CONS	d certifie een comp	es that the R lied with.	ules and R	Other (Given and August Augus	re explanations -520 characteristics The Oil Cons	ion below)	_)
Change in Owner Remarks: The undersigned mission have be Executed this the Approved	d certifie een comp	es that the R lied with.	ules and R	Other Company in I Address	re explanat	ion below)	_)
Change in Owner Remarks: The undersigned mission have be Executed this the Approved OIL CONS	d certifie een comp	es that the R lied with.	ules and R	Other Company in I Address	re explanations -520 characteristics The Oil Cons	ion below)	_)

Address First National Bank in Dallas

Dallas, Texas

NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICORDES OFFICE OCC

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

CLARA T: SCOTT AND FIRST NATIONAL BANK Company or Operator IN DALLAS, TRUSTES, U-87-O PAGE P. BEOTT Lease Vancin R. P . Las Druss Well No. 1 Unit Letter A S T The R Pool Things Kind of Lease (State, Fed. or Patented) Federal County If well produces oil or condensate, give location of tanks: Unit & S & T & R Authorized Transporter of Oil or Condensate Humble 011 & Refining Co. Box 2180, Houston 1, Texas. (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas Address (Give address to which approved copy of this form is to be sent) If Gas is not being sold, give reasons and also explain its present disposition: No gas, or if there is gas, it is not being produced in community. Reasons for Filing:(Please check proper box) New Well Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate () () Other (Give explanation below) Change in Ownership Remarks: Filed in compliance with commission order no. R-520 changing name of pool from Cooper-Jal to Jalmat. The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the 19th day of Approved CLARA T. SCOT OIL CONSERVATION COMMISSION CompanyIN DALLAS, THE TO

Title Oil & Gas Inspector

NEW MEXICO OIL CONSERVATION COMMISSION BOX 2045

HOBBS, NEW MEXICO

	•	DATE wasan of and
TO: Paul P. Scott Trust	_ .	
First Hatienal Bank	in Dallas	
Dellas, Texas		
	-	
Gentlemen:		
In accordance with	the provisions of Commi	ission Order No. R-520, your
Vaughan B-9, 1 A	, 9-24-36	which, according to our
records, is producing from t	• • • • • •	formation, will be placed in the
records, is producing from t		
Jelmet	Pool effective Oct	aber 1, 1955, and from that date
forward will be subject to t	the Commission's rules	and regulations governing that pool.
You are hereby inst	tructed to file Form C-	110 in Quintuplicate with the Hobbs
Office showing the change in	n pool designation not 1	later than September 1, 1985 . If
you desire to produce this w	well into common tankage	e with other wells in another pool
which are located on the sam	me basic lease, please i	incorporate the following statement
on the form C-110: "Permiss	sion is hereby requested	d to produce this well into common
storage with wells on the sa	ame lease currently prop	rated inpool."
If you do not agree	e with this classificati	ion of your well you should notify
this office in writing immed	liately.	
Failure to file For	rm C-110 by the specifie	ed time will result in Allowable
cancellation.		

OIL CONSERVATION COMMISSION

OCC Santa Fe

cc: Oil Transporter Humble
Gas Transporter
Well File

OIL CONSERVATION COMMISSION

BCX 2045

HOBBS, NEW MEXICO

DATE _____Feb. 1, 1955

TO:

RE: REQUEST FOR WELL RECORD

Paul P. Soctt Trust

First National Bank in Dallas

Dolles, Tores

Gentlemen:

In connection with Commission Crder R-520 an examination of the records of all oil and gas wells in the pools specifically mentioned in this order is being made.

A check of the file for your Vaughan B-9 #1 9-24-36
Lease Well No. S-T-R

shows that we do not have either Commission form C-105 or U.S.G.S. form 9-330. It is therefore requested that you submit the copies of the appropriate form to the above address as promptly as possible.

Your cooperation will be greatly appreciated.

Yours very truly,

OIL CONSERVATION COMMISSION

A. L. Porter, Jr. Proration Manager

ALP/hs

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

HOBBS OFFICE OCC

It is necessary that Form C-104 be approved before this form can be approved an an initial allowable be assigned to any completed Oil or Gas well. Submit this form in QUADRUPLICATE. 1354 UN 14 8:05

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

in Dallay, Trustee U-M	RET NATIONAL BANK
Company or Operator	Lease. Tangha 3-9 - 030467(3) Las Cruco
Address	Trust Dept., First National Bank in Dollas, T
Unit, Well(s) No, Sec	, T, R
County	Lease: Federal.
If Oil well Location of Tanks	
Authorized Transporter	HANNELL Mumble Pipe Line Co
Box 1390 Hidland Torres Onice)	(Principal Place of Business)
Per cent of Oil or Natural Gas to be Transported	Other Transporters authorized to transport Oil or Natural Gas
	las Co., El Paso, Toma.
REASON FOR FILING: (Please check proper box)	· 10
NEW WELL.	CHANGE IN OWNERSHIP
CHANGE IN TRANSPORTER	OTHER (Explain under Remarks)
REMARKS:	
Fermer Owner: Ham-Mex Cory 1203 Dellas Bellas, Texe	Mational Bank Bldg.,
The undersigned certifies that the Rules and Reg	gulations of the Oil Conservation Commission have been complied with.
Executed this theday of	
Approved, 1	9
OH CONSERVATION COMMISSION	By Clara J SCOTT CLARAT SCOTT
By fr. a. Sanson	Title TOWNAL BANK IN DALVAS, TRUSTEE, Vice-President
Title	Vice-President