- "i	FGY 250 MINEFALS DEPARTMENT	NU COMETIN	ATION DIVISIC	Revised 10-1-78
	CINTRIANITION	ЯL, CONSER 97 Р. О. НО		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SANTA FE, NEV	W MEXICO 87501	
	TRANSPORTER GAL			
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	Triton Oil & Gas Corp.			
	4849 Greenville Avenue #1000 - Dallas, Texas 75206			
	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of: Cil X Dry Ga		vember 1, 1988
	Change in Ownership	Casinghead Gas Condu		
	If change of ownership give name and address of previous owner			
	DESCRIPTION OF WELL AND	Vell No. Fool Name, Including F	ormation Kind of Lease	LC 030139A Loave No.
	J. T. Lynn	1 Jalmat Tansill	Yates 7 Rivers State, Federa	or Fee Federal I 282336
	Location Unit Letter I : 1980 Feet From The South Line and 330 Feet From The East			
		_	36Е , ММРМ,	
	Line of Section 20 Township 255 Hange 50E Flow My Liea			
!.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS           Name of Authorized Transporter of Cil X         or Condensate         Address (Give address to which approved copy of this form is to be sent)			
	Enron Oil Tradin	e & Transportation	P. O. Box 1188 - Houst Address (Give address to which approv	on, Texas 77251-1188
	Nome of Authorized Transporter of Cas El Paso Natural		P. O. Box 1492 - El Pa	·
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Who	en
	give location of tanks. I 28 23S 36E Nes Exact date unknown If this production is commingled with that from any other lease or pool, give commingling order number:			
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designete Type of Completio	t		
1	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
	Petiorations	<u> </u>		Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	· · · · · · · · · · · · · · · · · · ·			
			t and a set of load ail	and must be equal to or exceed top aviou
	TEST DATA AND REQUEST FOR ALLOWABLE       (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)         OIL WELL       IDate of Test         IProducing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test	producing Method (Flow, pump, gos	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls,	Gas-MCF
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitol, back pr.)	Tubing Pressure ( Shut-in )	Cosing Pressure (Sbut-in)	Choxe Size
	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION-DIVISION
hereby certify that the rules and regulations of the Oil Conservation			APPROVED	
	sivision have been complied with and that the information given sove is true and complete to the best of my knowledge and belief.		BYDUTUE	
			TITLE	
	47 Drug Kart		This form is to be filed in	compliance with HULE 1104.
	() ? () ///////////////////////////////	alwe)	If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
	Sr. Prod. Tech. 512-394-7974		All asctions of this form mu	at be filled out completely for allow
	(Title)		able on new and recompleted with	till and VI for changes of owner
	(Date)		well name or number, or transpor	ter, or other such change of condition t be fited for each pool in multipl