OBTRIBUTION SANTA FE FILE U.S.G.S. LANG OFFICE TRANSPORTER OPERATOR PROMATION OFFICE Operator

QIL CONSERVATION DIVISIONS P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Triton Oil &	Gas Corp.	,		
Address /8/0 Craenvi	lle Avenue #1000 - Dallas	. Texas 75206	,	
Reason(s) for filing (Check proper box)		Other (Please explain	,	
New Well	Change in Transporter of:	Effective 5	/21/00	
	Oil Dry Gas		31/66	
Recompletion Change in Ownership XX	Casinghead Gas Conden	sate		
f change of ownership give name and address of previous owner	Worldwide Energy Cor	poration - Drawer V	- Freer, Texas 78357	
DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including Fo	ormation Kind of	Lease LC 030467B Lease N	o.
Vaughn B-3	1 Jalmat Tansill	State 1	ederal or Fee Federal F 03243	6
Location	A 1	1000	From The West	
Unit Letter F: 198	O Feet From The North Line	e and 1900 Feet	From The WEST	
Line of Section 3 Tow	mship 24S Range	36E , NMPM,	Lea Coun	ΙΥ
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S	approved copy of this form is to be sent)	
Name of Authorized Transporter of Oti	or Condensate	Addiess (Othe daniess to much		
Shell Oil Company	eselvier.	P. O. Box 3105 -	Houston, Texas 77253-3105	
Name of Authorized Transporter of Cas	or Dry Gas	i '	approved copy of this form is to be sent)	
El Paso Natural Gas	Company		El Paso, Texas 79978-1492	
	Unit Sec. Twp. Rge.	is gas actually connected?	When	
If well produces oil or liquids, give location of tanks.	F 3 24S 36E	Yes	Exact date unknown.	
If this production is commingled with	th that from any other lease or pool,	give commingling order numbe		
COMPLETION DATA	Cil Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v. Diff. Re	s'v.
Designate Type of Completic	on = (X)	1	1 1	
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	
Perforations			Depth Casing Shoe	
	TIPLIE CICING AND	CEMENTING RECORD		
		DEPTH SET	SACKS CEMENT	
HOLESIZE	CASING & TUBING SIZE	DEF : H JC:		
		t and and along of la	ad oil and must be equal to or exceed top a	llow
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	da on and mast be team to a tree top o	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gos lift, etc.)	
	Tubing Pressure	Casing Pressure	Choze Size	
Length of Test			Gae-MCF	
Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	dus-inci	t
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Actual Prod. 1 est-MCF/D				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIAN	CE	OIL CONSE	RVATION DIVISION .	
		APPROVED	, 19	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the beat of my knowledge and belief.		APPROVED	- or anyton	
		BY DEIGHNA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		12.42	CONTRACTOR	
		TITLE		
1		This form is to be fil	ed in compliance with RULE 1104.	
LD CMM Kingsweet		I and the state of		
(Signature)		Il as as a farm much be at	companied by a tabulation of the davi	B; 10
19.0		tests taken on the well in	orm must be filled out completely for a	llow
Prod. Analyst (Title)		All sections of this form must be filled out completely for allow able on new and recompleted wells.		
6/14/88			is I, II, III, and VI for changes of overseporter, or other such change of condi-	un er Lilon
) at a l	Men usua of traupart of tr		

Separate Forms C-104 must be filed for each pool in multiple