

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

Table with columns for NO. OF COPIES RECEIVED, DISTRIBUTION, SANTA FE, FILE, U.S.G.S., LAND OFFICE, TRANSPORTER (OIL, GAS), OPERATOR, PRORATION OFFICE.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Triton Oil & Gas Corp.

Address 4849 Greenville Avenue #1000 - Dallas, Texas 75206

Reason(s) for filing (Check proper box)
New Well [] Change in Transporter of: Oil [] Dry Gas [] Effective 5/31/88
Recompletion []
Change in Ownership [X] Casinghead Gas [] Condensate []

If change of ownership give name and address of previous owner Worldwide Energy Corporation - Drawer V - Freer, Texas 78357

DESCRIPTION OF WELL AND LEASE

Table with columns: Lease Name (J. L. Coates), Well No. (3), Pool Name (Jalmat Tansill Yates 7 Rivers), Kind of Lease (State, Federal or Fee), Lease No. (D 102436), Location (Unit Letter D, 660 Feet From The North Line and 660 Feet From The West, Line of Section 10, Township 24S, Range 36E, NMPM, Lea County).

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Table with columns: Name of Authorized Transporter of Oil (Shell Oil Company Pipeline), Address (P. O. Box 3105 - Houston, Texas 77253), Name of Authorized Transporter of Casinghead Gas (El Paso Natural Gas Company), Address (P. O. Box 1492 - El Paso, Texas 79978), If well produces oil or liquids, give location of tanks (Unit D, Sec. 10, Twp. 24S, Rge. 36E), Is gas actually connected? (Yes), When (12-16-72).

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

COMPLETION DATA

Table with columns: Designate Type of Completion - (X), Oil Well, Gas Well, 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 Oil/Gas Pay, Tubing Depth, Perforations, Depth Casing Shoe.

TUBING, CASING, AND CEMENTING RECORD

Table with columns: HOLE SIZE, CASING & TUBING SIZE, DEPTH SET, SACKS CEMENT.

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Table with columns: Date First New Oil Run To Tanks, Date of Test, Producing Method (Flow, pump, gas lift, etc.), Length of Test, Tubing Pressure, Casing Pressure, Choke Size, Actual Prod. During Test, Oil - Bbls., Water - Bbls., Gas - MCF.

GAS WELL

Table with columns: Actual Prod. Test - MCF/D, Length of Test, Bbls. Condensate/MMCF, Gravity of Condensate, Testing Method (pilot, back pr.), Tubing Pressure (shut-in), Casing Pressure (shut-in), Choke Size.

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 above is true and complete to the best of my knowledge and belief.

Signature of Production Analyst

Production Analyst (Title)

6/14/88 (Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19__

BY ORIGINAL SIGNATURE OF THE DIVISION

TITLE _____

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 multiple...