Form 34:0-5 (Notember 2083) (Folinerly 9-331) DEPAR BUR	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1085 5. LEASE DESIGNATION AND SERIAL SO NMLC030467A				
SUNDRY NO (Do not use this form for pro- Use "APPI	6 IF INDIAN, ALLOTTER	6 IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME			
OIL XX GAS WELL OTHER	7. UNIT AGREEMENT NAM				
2. NAME OF OPERATOR			8. FARM OR LEASE NAME	:	
Triton Oil &	Vaughn A-	15			
Drawer V - Fr 4. LOCATION OF WELL (Report location See also space 17 below.) At surface	Jalmat Ta Seven Ri	l 10. FIELD AND POOL OR WILDCAT Jalmat Tansill Yate: Seven Rivers			
9			11. SEC., T., E., M., OR BI SURVEY OR AREA	A. AND	
SWSE, 660' FS	L and 1980' FEL		Sec. 15, T24S, R36E		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH		
Unknown	3356		Lea	NM	
16. Check	Appropriate Box To Indicate No	ature of Notice, Report, or (Other Data		
NOTICE OF IN	TENTION TO:	SUBSEC	URNT BEPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WI	ELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTUBE TREATMENT	ALTERING CAS	IING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDON MENT	•	
(Other) Change of O	CHANGE PLANS	(Other)	s of multiple completion or pletion Report and Log form	o Well	
Change of ope	rator from: Worldw:	_	ation		
	to: Triton	Oil & Gas Corp.			
	effective N	Tune 1, 1988.	And	-	
		NINO	ع ا	(7)	
		CARISBID REPORT		CEIVED	
			9400 9400		
		CARISE OF THE STATE OF THE STAT		•	
		. •			
8. I hereby certify that the foregoing SIGNED SIGNED		c. Prod. Tech.	DATE July	27 <u>, 1989</u>	
(This space for Federal or State of	office use)				
APPROVED BYCONDITIONS OF APPROVAL, IF	TITLE	·	DATE		

CISTRIBUTION
SANTA E

FILE
USINS. U S.G.S.

THE CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQU	EST FOR ALLOWA	ABLE
	AND	
NUTHORIZATION TO	TRANSPORT OIL	AND NATURAL GAS

THANSPORTER DIL GAS OPERATOR PROPATION OFFICE	AUTHORIZATIO:		.HD		RAL GAS			
Cyclotor Criton Oil & Coo	Corn							
Triton Oil & Gas	corp.							
4849 Greenville Reason(s) for filing (Check proper box	Avenue #1000 - D	allas, Te					,	
New Well	Change in Transpor	ter of:		Other (Please	explain)			
Recompletion	CII X	Dry Go	" D	Effe	ctive No	vember 1,	1988	
Change in Ownership	Casinghead Gas	Conue	acte			·····		
If change of ownership give name and address of previous owner					·		· · · · · · · · · · · · · · · · · · ·	
DESCRIPTION OF WELL AND	LEASE. Well No. Pool Nam	e, Including F	ormation		Kind of Lease	TC 030	467A	Lease No.
Vaughn A-15	1 Jalmat	Tansill	Yates 7	Rivers	State, Federal	or Fee Fede	ral	0 152436
Unit Letter 0 : 660	Feet From The	South to	e and 1	.980	Feet From T	he East		
Unit Letter	reer rom rise	<u> </u>	10 0110	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	reet riom i	ne <u>nasc</u>		
Line of Section 15 Tox	waship 24S	Range	36E	, NMPM,	 	Lea	·	County
DESIGNATION OF TRANSPOR				ve address to	which approv	ed copy of this j	orm is to	be sent)
Enron Oil Tradin	g & Transportati	on	P. O.	Box 1188	- Houst	on, TX 77	251-11	188
Name of Authorized Transporter of Cas	41	y Gas 🗌	1					
El Paso Natural	Gas Company Unit Sec. Twp	. Rge.	P. O.	Box 1492	d? El Pas	so, TX 79	978-14	192
If well produces oil or liquids, give location of tanks.		4S 36E	Yes		<u>;</u> 1	Exact date	unkno	own
If this production is commingled wit COMPLETION DATA	th that from any other le	Gas Well		gling order	number: Deepen	Plug Back So	me Res	v. ¹ Diff. Res ³ v.
Designate Type of Completic	on – (X)	1	1) }				
Date Spudded	Date Compl. Ready to Pr	rod.	Total Depth	<u> </u>	- 1	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Form	ation	Top Oil/Gas	s Pay	· · · · · · · · · · · · · · · · · · ·	Tubing Depth		
Perforations	<u> </u>					Depth Casing S	ihoe	
	TUBING, C	CASING, AND	CEMENTIN	G RECORD)			
HOLE SIZE	CASING & TUBIN	IG SIZE		DEPTH SE	Τ	SACH	SCEME	ENT
			i					
TEST DATA AND REQUEST FO	OR ALLOWABLE (T	est must be af ble for this de				nd must be equa	l to or ex	ceed top allow-
Date First New Oil Run To Tanks	Date of Test	.		Producing Method (Flow, pump, gas life		t, etc.)		
Length of Twat	Tubing Pressure		Casing Pres	sure		Choke Size		
Actual Prod. During Test	Oil-Bbls.		Water-Bols.		· · · · · · · · · · · · · · · · · · ·	Ga∌-MCF		
			L					
GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbls. Conde	nsate/MMCF		Gravity of Conc	lensate	
Testing Method (pitat, back pr.)	Tubing Pressure (Shut-	(n)	Casing Pres	nure (Shut-	(מ)	Choke Size		
			1					
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION APPROVED 19						
hereby certify that the rules and re prision have been complied with	egulations of the Oil Co and that the information	onservation on given	APPROV	ED			, 1	9
bove is true and complete to the	best of my knowledge	and belief.	BY		i <mark>al signed :</mark> District i s	IY JEROV SEX	TON	
•		•	TITLE_		ن 3 لايوند و هو و سو	un en tratif		
May ali	" Lance					mpliance with		
// Oft (()			well this	form must	be accompan	ble for a new! led by a tabula	tion of	or deepened the deviation
Sr. Prod. Tech.	512-394-7	974	tests take	n on the w	ell in accord	ance with MUI be filled out	.K 111.	
Titl			able on n	em and teco	empleted wel	le.		
(Date)			Fift out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					

Senarate Forms C-104 must be filed for each pool in multiply