SANTA FE REQUEST FOR ALLOWABLE FILE AND u.s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER OPERATOR PROPATION OFFICE Operator Triton Oil & Gas Corp. Address 2310 Republic Bank Tower, Dallas, Texas 75201 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas OII Recompletion Change in OwnershipXCasinghead Gas Condensate If change of ownership give name and address of previous owner ___ Argus Production Company, 3313 Republic Bank Tower, Dallas, Texas 75203

Well No.; Pool Name, Including Formation

or Dry Gas

Twp.

24S

Jalmat

Range

Rge.

Gas Well

36E

North Line and

36E

660

, NMPM,

El Paso, Texas

Is gas actually connected?

Yes

Total Depth

TUBING, CASING, AND CEMENTING RECORD

Top O!1/Gas Pay

Workover

DEPTH SET

Producing Method (Flow, pump, gas lift, etc.)

(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)

1

Feet From The

24S

23

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

Oil Well

Date Compl. Ready to Prod.

Name of Producing Formation

Date of Test

Oil - Bbls.

Tubing Pressure

Length of Test

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)

(Title)

(Date)

1971

Tubing Pressure (Shut-in)

CASING & TUBING SIZE

660

Township

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

El Paso Natural Gas Company

Unit

D

Shell Pipe Line Company

I. DESCRIPTION OF WELL AND LEASE

23

Name of Authorized Transporter of Casinghead Gas

Designate Type of Completion - (X)

V. TEST DATA AND REQUEST FOR ALLOWABLE

Name of Authorized Transporter of Oil

If well produces oil or liquids, give location of tanks.

Elevations (DF, RKB, RT, GR, etc.)

HOLE SIZE

Date First New Oil Run To Tanks

Actual Prod. During Test

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

i) E. Y.

March 24,

Chief Engineer

V. COMPLETION DATA

Date Spudded

Perforations

OIL WELL

Length of Test

GAS WELL

R. L. Gates

Lease Name

Unit Letter_

Line of Section

Location

Supersedes Old C-104 and C-110 Effective 1-1-65

Lease No.

County

D232436

Same Res'v. Diff. Res'v.

Casing Pressure Choke Size Water-Bbis. Gas - MCF Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION APPROVED BY. SUPERVISOR 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 multiply completed wells.

Kind of Lease

Feet From The

Address (Give address to which approved copy of this form is to be sent)

Address (Give address to which approved copy of this form is to be sent)

When

P.B.T.D.

Tubing Depth

Depth Casing Shoe

SACKS CEMENT

Box 2468, Houston, Texas

State, Federal or Fee Federal

West

Lea

RECEVED

MAR D. 1971

OIL CONSERVATION COMM. AUGSS, A. M.