

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT--" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
NASSAU RESOURCES, INC.

3. ADDRESS OF OPERATOR
P O BOX 809, Farmington, N.M. 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below)
At surface
810' FSL - 1670' FWL

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5950' GL

5. LEASE DESIGNATION AND SERIAL NO
NM 16471

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Cowsaround 2

9. WELL NO.
#14

10. FIELD AND POOL, OR WILDCAT
Basin Fruitland Coal

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 2, T26N, R12W, NMPM

12. COUNTY OR PARISH
San Juan

13. STATE
N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) TD, 4-1/2" csg., cement <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Reached TD of 1300' on 10-24-90.
 Ran 35 jts. of 4-1/2", 9.5#, J-55, ST&C LS casing.
 Set at 1278' GL.
 Cemented as follows:
 10 bbls. mud flush
 90 sk of 65/35 poz w/ 12% gel and 1/4#/sk flowseal (236 cu.ft.)
 40 sk of Class "B" with 1/4#/sk flowseal (47 cu.ft.)
 Total of 283 cu.ft.
 Full returns throughout job.
 Circulated 10 bbls. of cement to surface.
 Plug down at 1:55 am on 10-25-90.
 Pumped cement at 2-1/2 bbl/min. and 400 psi.
 Bumped plug with 800 psi. Float checked good.
 Centralizers on jts. #1, #3, #5, #7, #9, & #11.
 Set slips and released rig at 4:00 am on 10-25-90.

RECEIVED
 NOV 27 1990
 OIL CON. DIV
 DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED Fran Perrin TITLE Admin. Asst. DATE 10-25-90
 Fran Perrin

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ DATE NOV 20 1990
 CONDITIONS OF APPROVAL, IF ANY: _____ TITLE _____

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

BY [Signature]