

5 BLM, Fmn 1 DE 1 File
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 88 SEP -8 PM 2:45 | |
| 2. NAME OF OPERATOR NASSAU RESOURCES, INC. | | FARMINGTON RESOURCE AREA FARMINGTON, NEW MEXICO | |
| 3. ADDRESS OF OPERATOR P O Box 809, Farmington, NM 87499 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1525' FSL - 1540' FWL | | 8. FARM OR LEASE NAME Arboles 29A | |
| 14. PERMIT NO. | | 9. WELL NO. #1 | |
| 15. ELEVATIONS (Show whether OF, RT, GR, etc.) 7263' GL | | 10. FIELD AND POOL, OR WILDCAT WC Fruitland | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29, T32N, R4W, NMPM | |
| | | 12. COUNTY OR PARISH Rio Arriba | |
| | | 13. STATE NM | |

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

NOTICE OF INTENTION TO:

| | |
|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input checked="" type="checkbox"/> |
| FRACTURE TREAT <input checked="" type="checkbox"/> | MULTIPLE COMPLETION <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input checked="" type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) Change of Operator | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input 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.) *

Operator has been changed from Frontier Energy Corp. to NASSAU RESOURCES, INC.

Plan to:

1. Clean out well to PBTD of 4080'
2. Run & set 4" OD, 10.5#, K-55 flush joint liner at 3900' to 4080'.
3. Perforate liner at 4013'-4023', and 4029'-4040' w/ 4 SPF.
4. Frac Fruitland Coal using 200,000# of 12/20 sand in gelled water.
5. Return well to production for testing.

RECEIVED

SEP 12 1988

OIL CON. DIV.

DIST 3

9/7/88

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

SIGNED James S. Hazen

TITLE Field Supt.

DATE 9/7/88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

PH3000

*See Instructions on Reverse Side