S	TAT	OF	NEW	MEXICO	
NERGY	ANO	MIN	ERALS	DEPART	MENT

(Signature)

Field Supt.

(Title)

9-30-88 (Date)

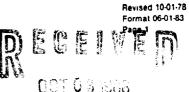
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DISTRIBUTIO	0 M		
SANTA FE		Π	
FILE			
U.B.G.B.			
LAND OFFICE			
TRANSPORTER	OIL		
OPERATOR			
PROBATION OF	KE		

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



Form C-104

REQUEST FOR ALLOWABLE AND

THE MEN TO T

	NOT OUT AND MATE	DAL CAS		
AUTHORIZATION TO TRANSP	ORT OIL AND NATU	SAL GAS SIST, S		
Operator				
•				
NASSAU RESOURCES, INC.	· · · · · · · · · · · · · · · · · · ·			
Address				
P.O. BOX 809, Farmington, N.M. 87499	<u> </u>			
Reason(s) for filing (Check proper box)	Other (Please	explain)		
X New Well Change in Transporter of:		•		
	y Gas			
	ndensate .			
(A) Change III Outstand				
If change of ownership give name Jerome P. McHugh, P O	Boy 809 'Farmir	gton, NM 87499		
and address of previous owner	DOX 005, Turmer	.80011		
	•	•		
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo	· · · · · · · · · · · · · · · · · · ·	Kind of Lease	Lease No.	
110 P 111-11		State, Federal or Fee Fed	NM 30016	
Carracas Unit 34 A . #5 Rusself Fruitland	loal	side, redetat ci ree red	MH 30016	
Location	•			
Unit Letter E : 1850 Feet From The North Lih	e and 1190	Feet From The West		
Unit Letter 1 1030 Feet From the 1107011 Lin	· · · · · · · · · · · · · · · · · · ·			
Line of Section 34 Township 32N Range	W , NMPN	, Rio Arriba	County	
Line of Section 34 Township 32N Adams				
THE DESCRIPTION OF THE ANCHORUTE OF OUR AND MATTIRAL	GAS	•		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	1 Address (Give address	to which approved copy of this form	is to be sent)	
Name of Authorized Transporter of Oil or Condensate				
	Address (Cine address	to which approved copy of this form	is to be sent)	
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX	1			
Nassau Resources, Inc.	P O Box 809,	Farmington, NM 87499		
Linux Sec. Twp. Rge.	is gas actually connected? When			
If well produces oil or liquids, give iccation of tanks. WATER ONLY E 34 32N 5W	No	· · · · · · · · · · · · · · · · · · ·		
WATER ORDER	give commingling orde	r number:		
If this production is commingled with that from any other lease or pool,	Sive Committeeing of a			
NOTE: Complete Parts IV and V on reverse side if necessary.				
NOTE: Complete Paris IV and V on Vertical	11			
VI. CERTIFICATE OF COMPLIANCE	. OIL C	ONSERVATION DIVISION	1 1000	
	1	\sim	1000	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED		'y	
been complied with and that the information given is true and complete to the best of	nv.	* Daniel J. Cha	2/	
my knowledge and belief.	B.Y		Λ	
1	if	Fill I HE OD DIOTRICE	_V_	

STREET IN DISTRICT EN 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.

IV	'. (CO	MP	LETI	ON	' DA	TA

D T . C . 1	(3/)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion	on — (A)	1	Х	X	į	•		1	•
Date Spudded	Date Compl	. Ready to P	rod.	Total Depti	h	- 1 	P.B.T.D.	·	·
9-30-87				81	60'		3207	•	
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Form	ation	Top Oil/Go	s Pay		Tubing Dep	th .	
6357; GL	6357; GL WC Fruitland		•	3080			3150'		
Perforations							Depth Castr	ng Shoe	
3080' to 3137'									
		TUBING,	CASING, AN	D CEMENTI	NG RECOR	D			
HOLE SIZE	CASI	NG & TUBI	NG SIZE		DEPTH SE	τ	SA	CKS CEMEN	IT
12-1/4"	9-	-5/8"		359'			190 cu.	ft.	
7-7/8"	5-	-1/2"		8155'			3147 cu		
	<u> </u>						in 3	stages.	
·	2-	-7/8"		3150'	,				

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

Date First New Oil Run To Tanks	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 - Bble.	Gas - MCF			
Actual Prod. During 1991		wdter - Bais.	GGB-MCF			

GAS WELL

		Bbis. Condensate/MMCF	Gravity of Condensate	
65	24 hrs.	-0-		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
back pressure	870 psi	1310 psi	0.500"	