

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1 File
SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

For approval
Budget Bureau No. 1004-0.33
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
1190' FNL - 1850' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7412' GL

5. LEASE DESIGNATION AND SERIAL NO.
NM 29760

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Carracas Unit

8. FARM OR LEASE NAME
Carracas Unit 23 A

9. WELL NO.
#2

10. FIELD AND POOL OR WILDCAT
Basin Fruitland Coal

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 23, T32N, R5W

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	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)	☐		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other)	☒	Resumption of drilling	☒

(NOTE: Report results of multiple completion on Well Completion or Reconpletion 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.)*

4/18/89 Pressure tested surface casing for 30 minutes at 800 psi.
Held okay.

Resumed drilling operations at 3 AM, 4/19/89.

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

SIGNED James S. Hazen

TITLE Field Supt.

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 4/18/89
ACCEPTED FOR RECORD

DATE APR 25 1989

FARMINGTON RESOURCE AREA

BY SMK

*See Instructions on Reverse Side

NMOCC