

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

1 File  
SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved  
Budget Bureau No. 1004-0.35  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL

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  
1450' FNL - 910' FWL

14. PERMIT NO.  
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6902' GL

NM 59704  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
Carracas Unit  
8. FARM OR LEASE NAME  
Carracas Unit 36 A  
9. WELL NO.  
#5  
10. FIELD AND POOL OR WILDCAT  
Basin Fruitland Coal  
11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 36, T32N, R5W, 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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANE

(Other) Request extension

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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.)\*

Request extension of Application to Drill due to drilling schedule.

THIS APPROVAL EXPIRES

MAY 01 1991

NOV 13 1990

OIL CON. DIV.

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

SIGNED

Fran Perrin

TITLE

Admin. Asst.

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE 10/15/90

NOV 05 1990  
DATE

AREA MANAGER  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side