

1 DE  
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-C, 35  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL NO.

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 checked="" type="checkbox"/> OTHER	7. UNIT SURVEY NAME
2. NAME OF OPERATOR NASSAU RESOURCES, INC.	8. CARRACAS UNIT
3. ADDRESS OF OPERATOR P.O. BOX 809, Farmington, N.M. 87499	9. WELL NO. #5
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	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
14. PERMIT NO.	11. SEC., T., R., S., OR BLK. AND SURVEY OR AREA Sec. 36, T32N, R5W, NMPM
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 6902' GL	12. COUNTY OR PARISH Rio Arriba
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	13. STATE NM
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) Status	SUBSEQUENT REPORT OF: WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <input type="checkbox"/> REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/>
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.)*	

The APD on this well expired 5/1/91.

Plan to resubmit this APD in the near future; therefore, no rehabilitation has been commenced.

RECEIVED  
JUL 31 1991  
OIL CON. DIV.  
DIST. 3

ACCEPTED FOR RECORD  
FARMINGTON RESOURCE AREA

JUL 19 1991

FARMINGTON, NEW MEXICO  
BY *[Signature]*

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

SIGNED

*[Signature]*  
James S. Hazen

TITLE

V. P. of Operations

DATE

7/10/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMO