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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator NASSAU RESOURCES, INC.		Well API No. 30-039-24461
Address P O BOX 809, Farmington, N.M. 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Carracas Unit 10 A	Well No. 11	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Foreign	Lease No. NM 30351
Location				
Unit Letter K : 1500 Feet From The West Line and 1800 Feet From The South Line				
Section 10 Township 32 North Range 5 West , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Nassau Resources, Inc.	P O BOX 809, Farmington, N.M. 87499	
If well produces oil or liquids, give location of tanks. water only	Unit K	Sec. 10
	Twp. 32N	Rge. 5W
	Is gas actually connected? YES	When? 9/15/89

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 7/23/89	Date Compl. Ready to Prod. 9/15/89		Total Depth 4300'		P.B.T.D. 4220' KB			
Elevations (DF, RKB, RT, GR, etc.) 7555'	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 4024'		Tubing Depth 4050' KB			
Perforations 4024' - 4046' KB					Depth Casing Shoe 4317' KB			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		334' KB		184 cu.ft.			
8-3/4"	5-1/2"		4317' KB		1449 cu.ft.			
	2-7/8"		4050' KB					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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SEP 19 1989  
OIL CON.  
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D 10 mcf/d	Length of Test 9/16/89	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) Pumping	Tubing Pressure (Shut-in) 0	Casing Pressure (Shut-in) 0	Choke Size .250"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Fran Perrin  
Signature  
Fran Perrin Admin. Asst.  
Printed Name  
9/18/89 505 326-7793  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 19 1989  
By Original Signed by FRANK T. CHAVEZ  
Title SUPERVISOR DISTRICT III

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.