

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Carracas Unit
2. NAME OF OPERATOR NASSAU RESOURCES, INC.		8. FARM OR LEASE NAME Carracas Unit 24 B
3. ADDRESS OF OPERATOR P O BOX 809, Farmington, N.M. 87499		9. WELL NO. #1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  790' FNL - 990' FEL		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T32N, R4W, NMPM
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 6995' GL; 7008' KB		12. COUNTY OR PARISH Rio Arriba
		13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) TD, 5-1/2" csg., cement <input checked="" type="checkbox"/>	

(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.)\*

Reached TD of 3201' on 8-23-90.  
Ran 77 jts. of 5-1/2", 17#, K-55, LT&C casing.  
Set at 3196' KB.  
Cemented as follows:  
710 sk of 65/35 poz w/ 12% gel and 1/4#/sk flocele (1860 cu.ft.)  
100 sk of 50/50 poz w/ 2% gel, 6-1/4#/sk gilsonite and 1/4#/sk flocele (139 cu.ft.)  
Total of 1999 cu.ft.  
Full returns throughout job.  
Circulated 31 bbls. of cement to surface.  
Maximum rate 6.5 bpm  
Maximum pressure 900 psi  
Bumped plug with 1300 psi.  
Centralizers on #1, #3, #5, #7, #9, #11, #13, #15.  
Turbulizer on #16 at 2552'.  
Plug down at 12:00 midnight on 8-24-90.  
Set slips and released rig at 2:30 am on 8-25-90.

RECEIVED

SEP 13 1990

OIL CON. DIV.  
DIST. 3

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

SIGNED

Fran Perrin

TITLE

Admin. Asst.

DATE

8-27-90

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 06 1990

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY