4 NMOCD, Aztec 1 DE 1 File 1 CNG 1 Amoco 1 Dugan

Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

1 NWP State of New Mexico Energy, Minerals and Natural Resources Department

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

DISTRICT II

OIL CONSERVATION DIVISION

r.O. Drawer DD, Artesia, NM 88210			OX 2088						
DISTRICT III		Fe, New M	lexico 8750	04-2088					
1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR	ALLOWA	BI F AND	AUTHORI	ZATION				
•	TOTRANS								
Operator				API No.					
	NASSAU RESOURCES, INC.				30-0	039-24653			
Address	•								
P O BOX 809, Fa		87499							
Reason(s) for Filing (Check proper box) New Well			Oth	er (Please expl	ain)				
Recompletion	Change in Trai								
hange in Operator	· · ·	ndenmate							
change of operator give name	Caranghead Cas Col	nocusace []							
d address of previous operator				· · · · · · · · · · · · · · · · · · ·					
. DESCRIPTION OF WELL	AND LEASE							•	
ease Name	ing Formation Kind			of Lease No.					
Carracas Unit 2	4 B 13 B.				, Federal or Fleex x NM 30585				
ocation					· · · · · · · · · · · · · · · · · · ·			7.70.7	
Unit LetterM	:840Fee	et From The	south Line	and119	90 F e	et From The	west	Line	
.								Linu	
Section 24 Towns	nip 32 North Ran	nge 4 West	<u>t , Ni</u>	MPM, R	io Arril	na		County	
I. DESIGNATION OF TRAI	NCPAUTED OF ALL	ARIEN REACTES	DAT CLC						
arme of Authorized Transporter of Oil	JRAL GAS Address (Give address to which approved copy of this form is to be sent)								
•	or Condensate			E33 10 W/	шся а <i>рр∗о</i> чеа	copy of this j	iorm is to be se	int)	
ame of Authorized Transporter of Casis	nghead Gas or I	Dry Gas	Address (Gin	address to wil	hich con-	cons of all-	form in to 1		
Nassau Resources, Inc.			Address (Give address to which approved copy of this form is to be sent) P O Box 809, Farmington, N.M. 87499						
well produces oil or liquids,	produces oil or liquids.			Is gas actually connected? When ?					
e location of tanks. wtr. only	0 11 3	2N 4W	Yes		""	-	11-90		
his production is commingled with that	from any other lease or pool,	, give comming	ling order numb	er:					
. COMPLETION DATA								· · · · · · · · · · · · · · · · · · ·	
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
te Spudded	1	X	X		1	İ	İ	i	
7-12-90	Date Compl. Ready to Proc	d.	Total Depth			P.B.T.D.			
evations (DF, RKB, RT, GR, etc.)	10-5-90 Name of Producing Formation		3974 'KB Top Oil/Gas Pay			3908' KB			
6835' GL; 6847' KB	1		3743' KB			Tubing Depth			
forations	Fruitland Coal		1 3/43			3811 Depth Casir	' KB		
37	43 - 3800'					3974			
	TUBING, CA	SING AND	CEMENTIN	IG RECOR	D	1 39/4			
HOLE SIZE	•	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12-1/4"	9-5/8"		300'						
9-5/8"	5-1/2"		3974'		· · · · · · · · · · · · · · · · · · ·	222 cu.ft. circ. to su 1302 cu.ft.			
2-7/8"			3811' KB			1302 (4.16.)			
									
TEST DATA AND REQUE						1			
L WELL (Test must be after 1	recovery of total volume of loa	ad oil and must	be equal to or	exceed top allo	wable for this	depth or be j	for full 24 hour	·s.)	
e First New Oil Run To Tank	Date of Test		Producing Met	thod (Flow, pu	mp, gas lýt, e	ic.)			
igh of Test	Tuking Danger					124 7 20	·		
	Tubing Pressure		177 5 1	EV		Choke Size			
ual Prod. During Test	Oil - Bbls.) tr: 4 +	- 	Gas- MCF	···		
-			Warer - Bbla	r 1 8 1990	Mark 27	ORD- MICE			
AS WELL			<u> </u>	1 0 1336	<i></i>	I	· · · · · · · · · · · · · · · · · · ·		
ual Prod. Test - MCF/D	Length of Test		no. Alla C	MAN Me)!V	121			
68	-	24 hrs.		Boli Colden Colly . - DIST. 3			Gravity of Condensate		
ing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
Flowing	900 psi			•) = 11		
OPERATOR CERTIFIC		NICE	900	กลา		0.62	<u>'</u> 5		
hereby certify that the rules and regul			C	IL CON	SERVA	TION I	DIVISIO	N	
Division have been complied with and that the information given above				5511				. •	
s true and complete to the best of my l	knowledge and belief.		Data	Annra:	, NN	V 23	1990		
φ Ω	Date Approved 1101 2 3 1000								
Fran Peru				Original Signed by CHARLES GHOLSON					
Signature Fran Perrin	Admin. Ass	-	By			, = •			
rian reiiin	Admin. Ass			WEDS 1441	OH • C+C	INCDESTAN	פת לאנו (
10-17-90	505 326-779:		Title_	ינוטוז	OIL & GAS	INSTITUTE	., いいこ #3		
Pate	Telephone								
		,							

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