

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. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 30585

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**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  
1780' FSL - 1590' FWL
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
7065' GL

7. UNIT AGREEMENT NAME

Carracas Unit

8. FARM OR LEASE NAME

Carracas Unit 36 B

9. WELL NO.

#11

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR B.L. AND  
SURVEY OR AREA

Sec. 36, T32N, R4W, NMPM

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

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

NOTICE OF INTENTION TO:

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)	Request for Extension of APD		

SUBSEQUENT REPORT OF:

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)			

(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 and Forest Service restrictions on drilling in possible owl habitat.

RECEIVED  
BLM

93 MAY 10 AM 11:45

070-FARMINGTON, NM

THIS APPLICATION EXPIRES NOV 18 1993

RECEIVED  
MAY 28 1993  
OIL CON. DIV.  
DIST. 3

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

SIGNED Fran Perrin Fran Perrin

TITLE Regulatory Liaison

DATE 5/6/93

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

MAY 26 1993

DISTRICT MANAGER

\*See Instructions on Reverse Side  
NMOC