

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1. FILE
SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Budget Bureau No. 100
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 59704

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Carracas Unit

8. FARM OR LEASE NAME

Carracas Unit 36 A

9. WELL NO.

#5

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

11. SEC., T., S., M., OR BLM. AND
SURVEY OR AREA

Sec. 36, T32N, R5W, NMPM

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

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

1450' FNL - 910' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, RT, OR, etc.)

6902' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

Request extension

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 perti-
nent to this work.)*

Request extension of Application to Drill due to drilling schedule.

RECEIVED

NOV 9 1992

OIL CON. DIV.
DIST. 3

THIS APPROVAL EXPIRES MAY 19 1993

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

SIGNED

Fran Perrin

TITLE Regulatory Liaison

DATE 10/30/92

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

NOV 06 1992

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY