Submit 5 Copies
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

DISTRICT II F.O. Drawer DD, Artesla, NM 88210

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OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III	
1000 Rio Brazos Rd., Aztec, NM 87	410

1 DL

Santa Fe, New Mexico 87504-2088

I.	REQ	UEST F	OR AL	LOWA	BLE AND AUTI	HORIZAT	ION			
TO TRANSPORT OIL AND NATURAL GAS					NE GAS	Well AFI No.				
NASSAU RESOURCES, INC. OGRID #015515				30-039-25254						
P O BOX 809, Fa	rmingt	on, N.M	. 87	499						
New Well		Change in	. Teamon	ntan afi	Other (Fled	se explain)				
Recompletion	Oil	Cuanke II	Dry Gai							
Change in Operator	Casinghe	ad Gas	Conden		Change	in pool	name			
If change of operator give name and address or previous operator							1 -			
•						- 115	\		· · · · · · · · · · · · · · · · · · ·	
U. DESCRIPTION OF WELL LEARS Flame	AND LE					961	,		•	
CARRACAS UNIT-PC 26B	ı	Well No.			ling Formation		Kind of Lease	Lease	No.	
Location] 3	MITG	cat:Ca	rracas-Pictu	red Clif	Style, Federal optize	NM 288	12	
Unit Letter C	_ :79	0	. Feel Fro	on The	North Line and _	1800	Feet From The _		Line	
Section 26 Townsh	ip 32N	•	D		•				Mile	
	<u></u>		Range	4W	NMPM,	Rio A	<u>rriba</u>		County	
III. DESIGNATION OF TRAN	1SPORTE	ER OF O	IL ANI) NATU	RAL GAS					
Name of Authorized Transporter of Oil		or Conden	sale	7	Address (Give addre.	s to which an	proved copy of this fo	rm is to be south		
Riama of Australia			· · · · · ·			•	,	m S to be semy		
Name of Authorized Transporter of Casin	-		or Dry (Jas XX	Address (Give addres	s to which of	proved copy of this fo	m is to be sent)		
NASSAU RESOURCE: If well produces oil or liquids,		<u> </u>	(P O BOX 80	09, Farm	ington, N.M.	ton, N.M. 87499		
give location of tanks.	Unit		Iwp.		is gas actually connec		When ?			
f this production is commingled with that	C C	26	32N	_4W	Yes					
V. COMPLETION DATA	nom any ou	iet lease of l	pool, give	comming	ling order number:					
Designate Total 6.5		Oil Well	1 0	n Well	New Well Works					
Designate Type of Completion	- (X)			I I WORK	over Dee	pen Plug Back	Same Res'v Diff	f Res'v		
Date Spudded	Date Com	pl. Ready to	Frod.		Total Depth	I	II. P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)			·				1.5.1.5.			
Name of Producing Formation		Top Oil/Cas Pay		Tubing Depth	Tubing Depth					
erforations	┸				<u> </u>					
							Depth Casing	Shoe		
	-	UBING	('ASIN	(I ANI)	CEMENTING	CODI				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE		7E	DEPTH SET						
					UEP 11	1 251	S/	SACKS CEMENT		
. TEST DATA AND REQUES	T FOR A	LLOWA	BLE				<u>-</u>			
IL WELL (Test must be after re	covery of to	tal volume of	f load oil	and must	be equal to or exceed to	op allowable fi	or this denth or he for	Gill 24 hours		
Date First New Oil Run To Tank	Date of Tes	1			Producing Method (FI	ow, pump, gas	lýt, etc.)	Jan 24 110 lb 3.)		
ength of Test			······································							
angui or sea	Tubing Fres	isure			Casing Pressure		Choke Size	· · · · · · · · · · · · · · · · · · ·		
ctual Prod. During Test	Oil Bhis	Oil - Bbls.			201					
5 5 5 5 5	Oir - Bols.			ľ	Water - Bbis.		Gas- MCF			
GAS WELL	L									
clus Frod. Test - MCF/D	11 									
rion Flor test - MCIAD	Length of T	est			Bbls. Condensate/MM	CF -	Gravity of Con	densate		
sting Method (pitot, back pr.)	Tubing Per	Tubing Pressure (Shut-in)			71-1 <u>F</u>					
i i i i i i i i i i i i i i i i i i i	ruomg ties	sore (Snut-In	, i	-	Casing Pressure (Shut-	in)	Choke Size			
I OPERATOR CERTIFICA	ATPOP	COL								
I. OPERATOR CERTIFICAL hersby configuration that the subsection of	VIE OF	COMIL	IVNC	E		ONCE	MATIONES			
I hereby certify that the rules and regular Division have been complied with and the	hat the inform	nation eiven	tion shove	l		ONOEF	RVATION D	IVISION		
is true and complete to the best of my kr	towledge and	belief.	= 001€	- 1			400 -			
·					Date Appro	oved	APR - 5	444		
Fran Penin										
Signature		II	By Original Signed by CHARLES GROLSON							
Fran Perrin Ro	egulațo			[]						
5.44.00)5 326-1		ille		Title	PEPULY OIL	. & GAS INSPECTO	ικ, υιλί. # 3		
1)ale 50	,J J20-		one No.				7	·····		

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) Senarate Form C-104 must be filed for as