

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
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator NASSAU RESOURCES, INC.		Well API No. 30-039-22496
Address P.O. Box 809, Farmington, N.M. 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Effective 7/1/93		
If change of operator give name and address of previous operator Jerome P. McHugh, P.O. Box 809, Farmington, N.M. 87499		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jelly Dog Jerry	Well No. 1	Pool Name, Including Formation So. Blanco P.C.	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>F</u> : <u>1520</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>West</u> Line Section <u>33</u> Township <u>24N</u> Range <u>2W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 4990, Farmington, N.M. 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?
F 33 24N 2W	yes

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
			OIL CON. DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Fran Perrin
Printed Name Fran Perrin Title Regulatory Liaison
Date 6/24/93 Telephone No. 505 326 7793

OIL CONSERVATION DIVISION

Date Approved JUN 28 1993By [Signature]
Title SUPERVISOR DISTRICT #3

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) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 3 Copies
to Appropriate
District Office

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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO.

30-039-22496

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

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. Well Location

Unit Letter F : 1520 Feet From The North Line and 1850 Feet From The West Line

Section 33

Township 24N

Range 2W

NMPM

Rio Arriba

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

7130 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Plan to plug and abandon this well as shown on attached Plug and Abandonment Procedure.

RECEIVED
JUN - 9 1994

OIL CON. DIV.
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____ TITLE Regulatory Liaison DATE 6/9/94

TYPE OR PRINT NAME Fran Perrin Regulatory Liaison TELEPHONE NO. 505 326-7793

(This space for State Use)

APPROVED BY Charles Holson DEPUTY OIL & GAS INSPECTOR, DIST. 3 DATE JUN 9 1994

CONDITIONS OF APPROVAL, IF ANY:

WAS A MINIMUM OF 4 HOURS BEFORE PRESSURE TEST

May 17, 1994

J. P. McHugh

Jelly Dog Jerry #1 (PC)
NW, Sec. 33, T24N, R2W
Rio Arriba County, New Mexico

PLUG AND ABANDONMENT PROCEDURE:

(All cement volumes use 100% excess outside pipe and 50' inside;
a 8.3 ppg plugging fluid exceeds the exposed reservoirs' pressure.)

1. Install and/or test rig anchors. Prepare blow pit. Comply to all NMOC, BLM and McHugh safety rules and regulations.
2. MOL and RUSU. Blow well down; kill with water if necessary. ND wellhead and NU BOP and stripping head; test BOP.
3. POH and tally 1-1/4", 2.4# EUE tubing; visually inspect.
4. **Plug #1 (PC perfs):** RIH with open ended tubing to 3073'; pump 20 bbls of water down tubing. Mix 27 sxs Class B cement and spot balanced plug from 3073' to 2922'. POH to 1000' and WOC. RIH and tag cement; then LD one joint. Load well with water and circulate clean, pressure test casing to 500#.
5. **Plug #2 (Ft, Kt & OA tops):** Mix 35 sxs Class B cement and spot balanced plug from 2972' (or top of cement) to 2815'. POH and LD tubing.
6. **Plug #3 (Surface):** Perforate 2 holes at 183'. Establish circulation out bradenhead. Mix 30 sxs Class B cement and pump down 4-1/2" casing, circulate good cement out bradenhead valve. Shut in well and WOC.
7. ND BOP and cut off wellhead below surface casing flange and install P&A marker to BLM spec. RD and MOL. Cut off anchors.
8. Restore location per surface agreement.