Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPRÓVED
Budget Bureau No. 1004-0135
Evnices: Merch 11 1993

	Expires:	March	31, 199	3
5 Lease	Designat	ion and	Serial	No

6. If Indian, Allottee or Tribe Name

Э.	Lease	Desi	guation	#ING	SCHIBI
NI	1 28	381	2/		

SUNDRY NOT	ICES AND	REPORTS	ON WELLS
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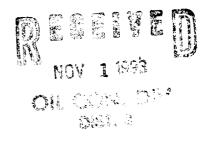
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals

USE "APPLICATION FOR	I PERMIT — TOL SUCII PROPOSAIS	/
SUBMIT	IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well Oil Well X Well Other 2. Name of Operator NASSAU RESOURCES, INC 3. Address and Telephone No. P O BOX 809, Farmingt 4. Location of Well (Footage, Sec., T., R., M., or Survey De Sec. 35, T 32 N, R 1340' FNL & 1085'	con, N.M. 87499 scription) 4 W, NMPM FEL	Carracas Unit 8. Well Name and No. Carracas Unit-PC 35B #8 9. API Well No. 30-039-25332 10. Field and Pool, or Exploratory Area Undesign. Picture Cliffs 11. County or Parish, State Rio Arriba, N.M.
12 CHECK APPROPRIATE BOX(S	S) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTI	ON
Notice of Intent Subsequent Report Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing XX Other Amended TD	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form)

13 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.)*

Logger's TD = 4227' KB.



RECEIVED BLM 93 OCT 27 PN 3: 06 070 FAND BLOOK NM

I hereby certify that the foregoing is true and correct Signed Flan Crue Fran Perrin	Title	Regulatory Liaison	Date
(This space for Federal or State office use) Approved by Conditions of approval, if any:	_ Title	3	CEP1 ElDate
Conditions of approved in any			OCT 2