

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

Jicarilla Joint Venture
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

Odessa Natural Corporation

3. ADDRESS OF OPERATOR

P.O. Box 3908, Odessa, Texas 79760

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

890' FSL, 1020' FEL

14. PERMIT NO.

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

7285'G.L., 7296'D.F., 7297'KB

Jicarilla Apache
7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla Joint
Venture "PC"

9. WELL NO.

101

10. FIELD AND POOL, OR WILDCAT
Ballard

Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 4-T23N-R3W

N.M.P.M.

12. COUNTY OR PARISH 13. STATE

Rio Arriba

N.M.

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

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 pertinent to this work.)*

See attached for fracture treatment.

For: Odessa Natural Corporation

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

President, Walsh Engr.

SIGNED Ewell N. Walsh, P.E.

TITLE & Production Corp.

DATE 7-26-78

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JUL 28 1978

*See Instructions on Reverse Side

U.S. GEOLOGICAL SURVEY

FRACTURE TREATMENT Stage No. 1

Date 6/23/78

Operator Odessa Natural Corporation Lease and Well Jicarilla Joint Venture "PC" No. 101

Correlation Log Type GR Collar From 3264 to 2450

Temporary Bridge Plug Type -- Set At --

Perforations 3108'-3114' 3116'-3123'
2 per foot type 3½" Glass Strip Jets

Pad 6360 gallons. Additives 2% Kcl
2 lb. FR 20 per 1000 gall.

Water 51020 gallons. Additives 2% Kcl, 2 lb.
FR 20 per 1000 gal & 1 gal Howco Suds per
1000 gal in last 30,000 gal.

Sand 55,000 lbs. Size 20/40

Flush 2,500 gallons. Additives 2% Kcl, 2 lb.
per 1000 gal FR 20 and 1 gal Howco Suds per
1000 gal.

Breakdown 3000 psig

Ave. Treating Pressure 900 psig

Max. Treating Pressure 1100 psig

Ave. Injecton Rate 37 BPM

Hydraulic Horsepower 816 HHP

Instantaneous SIP 450 psig

5 Minute SIP 360 psig

10 Minute SIP 340 psig

15 Minute SIP 320 psig

Ball Drops: None Balls at gallons psig
 Balls at gallons psig
 Balls at gallons psig

Remarks: