

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Contract No. 183	
2. NAME OF OPERATOR Odessa Natural Corporation Att: John Strojek		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR P.O. Box 3908, Odessa, Texas 79760		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  790'FNL, 790'FEL		8. FARM OR LEASE NAME Chacon Jicarilla "D"	
14. PERMIT NO.		9. WELL NO. 11	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7383'GL, 7396'DF, 7397'KB		10. FIELD AND POOL, OR WILDCAT Chacon Dakota Associated Pool	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28-T23N-R3W	
		12. COUNTY OR PARISH Sandoval	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)\*

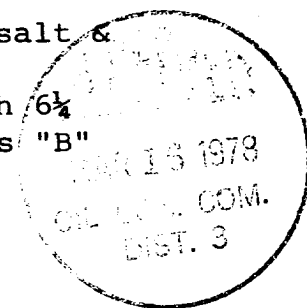
2-14-78 Spud well

2-14-78 T.D. 280'

Ran 6 jts. 8 5/8", 24.0 lb., K-55 casing (259.10)  
Set at 273.10' with 350 sacks Class "B" cement with  
3% Calcium chloride and 1/4 lb. Flocele per sack. Cement  
circulated. Pressure test with 500 psig. Test OK.

3-05-78 T.D. 7606'

Ran 264 jts. 4 1/2", 10.50 & 11.60 lb., K-55, S & LT & C,  
Casing (7,586') set 7599' with:  
First Stage: 470 sacks, 50/50 Pozmix with 6 lbs. salt &  
6 1/4 lbs. Gilsonite per sack.  
Second Stage: 300 sacks 65/35 Pozmix (12% Gel) with 6 1/4  
lbs. Gilsonite per sack, followed by 50 sacks Class "B"  
Neat cement. Stage collar at 3109'.



18. I hereby certify that the foregoing is true and correct.  
SIGNED Ewell N. Walsh, P.E. President, Walsh Engineering  
TITLE & Prod. Corp. DATE 3-08-78  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

RECEIVED

MAR 13 1978

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
DURANGO, COLO.