

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse 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		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 1850'FSL, 1850'FWL		8. FARM OR LEASE NAME Chacon Jicarilla "D"	
14. PERMIT NO.		9. WELL NO. 18	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7460'GL, 7473'DF, 7474'KB		10. FIELD AND POOL, OR WILDCAT Chacon Dakota Associated	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T23N-R3W N.M.P.M.	
		12. COUNTY OR PARISH Sandoval	
		13. STATE N.M.	

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 type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" 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"/>	
(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.)\*

SEE ATTACHED FOR FRACTURE TREATMENTS.



ACCEPTED FOR RECORD

OCT 2 1980

FARMINGTON DISTRICT

BY h

FOR: ODESSA NATURAL CORPORATION

18. I hereby certify that the foregoing is true and correct.  
SIGNED EWELL N. WALSH President, Walsh Engr. & Production Corp. DATE 9/30/80  
Ewell N. Walsh, P.E.  
(This space for Federal or State office use)

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

\*See Instructions on Reverse Side

NMOCC

# FRACTURE TREATMENT

Formation Dakota "B" Stage No. I

Date 9/23/80  
Chacon Jicarilla

Operator ODESSA NATURAL CORPORATION Lease and Well "D" No. 18

Correlation Log Type GR-CCL From 7620' To 5900'

Temporary Bridge Plug Type \_\_\_\_\_ Set At \_\_\_\_\_

Perforations 7459'-7461'; 7464'-7479'  
2 Per foot type 3-1/2 Glass Strip Jet

Pad 7,000 gallons. Additives 1% Kcl. 2 lbs  
FR-20 per 1000 gallons. 15 lbs. Adomite per 1000  
gallons & 1 gallon Emulsion Breaker.

Water 40,000 gallons. Additives 1% Kcl. 2 lbs  
FR-20 per 1000 gallons. 15 lbs. Adomite per 1000  
Gallons.

Sand 40,000 lbs. Size 20/40

Flush 40,000 gallons. Additives 1% Kcl. 2 lbs  
FR-20 & 15 lbs. Adomite per 1000 gallons and 1 gallon  
Emulsion Breaker

Breakdown 3000 psig

Ave. Treating Pressure 2600 psig

Max. Treating Pressure 2900 psig

Ave. Injecton Rate 32 BPM

Hydraulic Horsepower 2275 HHP

Instantaneous SIP 1600 psig

5 Minute SIP 1400 psig

10 Minute SIP 1400 psig

15 Minute SIP 1300 psig

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

Remarks: \_\_\_\_\_

# FRACTURE TREATMENT

Formation Dakota "A" Stage No. II

Date 9/24/80

Operator ODESSA NATURAL CORPORATION

Lease and Well Chacon Jicarilla  
"D" No. 18

Correlation Log Type \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Temporary Bridge Plug Type Halliburton Speed-E-Line Set At 7442'

Perforations 7349'-7387' (1 per foot) 7418'-7421' (2 per foot)  
Per foot type 3-1/2" Glass Strip Jet

Pad 10,000 gallons. Additives 1 % Kcl. 2 lbs  
FR-20 per 1000 gallons. 1 gallon Frac Flo per  
1000 gallons. 15 lbs. Adomite per 1000 gallons.

Water 80,000 gallons. Additives 1 % Kcl. 2 lbs  
FR-20 per 1000 gallons. 15 lbs. Adomite per 1000  
gallons.

Sand 80,000 lbs. Size 20-40

Flush 4,900 gallons. Additives 1 % Kcl. 2 lbs  
FR-20 per 1000 gallons.

Breakdown 3500 psig

Ave. Treating Pressure 2700 psig

Max. Treating Pressure 3000 psig

Ave. Injecton Rate 38.0 BPM

Hydraulic Horsepower 2550 HHP

Instantaneous SIP 1850 psig

5 Minute SIP 1600 psig

10 Minute SIP 1500 psig

15 Minute SIP 1400 psig

Ball Drops: 12 Balls at 40,000 gallons -- psig  
5 Balls at 60,000 gallons -- psig  
\_\_\_\_\_ Balls at \_\_\_\_\_ gallons \_\_\_\_\_ psig

Remarks: \_\_\_\_\_