NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE /	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee 2
OPERATOR 4			5, 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.)			
OIL X GAS WELL X	OTHER•		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
ODESSA NATURAL CORPORATION			Shipley
3. Address of Operator			9. Well No.
P.O. BOX 3908	ODESSA, TEXAS 79760	<b>(</b>	1
4. Location of Well			10. Field and Pool, or Wildcat Chacon Dakota
UNIT LETTER 0 800 FEET FROM THE SOUTH LINE AND 1650 FEET FROM			Chacon Dakota Associated Oil Pool
20 247 277			
THE East LINE, SECTION	N 33 TOWNSHIP 24N	RANGE 3W	NMPM. (((())))
		DE DE CD	
	15. Elevation (Show whether	Dr, KI, GK, etc.)	12. County
			Rio Arriba
Check A	Appropriate Box To Indicate N	ature of Notice, Repor	rt or Other Data
NOTICE OF IN	TENTION TO:	subs	EQUENT REPORT OF:
PERFORM REMED!AL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ASANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOS	
		OTHER See Be	elow
OTHER			
Approval is :  Permit To Drill,	requested to extend for the subject well	the approval o	including estimated date of starting any propo f the Application for 31, 1978. The well
should be drilled	during the first qu	arter of 1978.	
			-
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	FURL TO THE TENT	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	
_			The second of the second
EXETY: 12-26-77			
	SACA DESCRIPTION OF SE		
FOR: ODESSA NATU	RAL CORPORATION		
18. I hereby certify that the information	above is true and complete to the best	of my knowledge and belief.	
	<b>VL///</b> PRJ	ESIDENT, WALSH	ENGINEERING
- 100001110	TO SEE SE	PROD. CORP.	DATE 9-27-77
SIGNED	THE G		
(11) (50)	ndesch st	PERVISOR DIST. 🦗	DATE
APPROVED BY	The state of the s		
CONDITIONS OF APPROVAL, IF ANY	:		