(Other)

## **UNITED STATES** UNITED STATES SUBMIT IN TRIPLICATE\* Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO. SF-078899

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEOLOGICAL SURVEY

SUNDRY NOT (Do not use this form for propo Use "APPLIC	G. IF INDIAN, ALLOTTEE OR TRIBE NAME			
OIL GAS OTHER		7. UNIT AGREEMENT N.	AME	
2. NAME OF OPERATOR Odessa Natural Corp	8. FARM OR LEASE NA Blackrock			
3. ADDRESS OF OPERATOR P.O. Box 3908 Odessa, Texas 79760		9. WELL NO. 1-E		
<ol> <li>LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)</li> <li>At surface</li> </ol>		Basin Dakota		
790'FSL, 1770'FWL		Sec. T., R., M., OR SURVEY OF AREA Sec. 21-126 NMPM		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6208 GL, 6221 DF, 6222 KB	12. COUNTY OR PARISE San Juan	N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: REPAIRING WELL PULL OR ALTER CASING WATER SHUT-OFF TEST WATER SHUT-OFF ALTERING CASING FRACTURE TREATMENT MULTIPLE COMPLETE FRACTURE TREAT ABANDONMENT\* SHOOTING OR ACIDIZING ABANDON\* SHOOT OR ACIDIZE See Below REPAIR WELL CHANGE PLANS

(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.) \*

Change in name of operator to correct name on Application for Permit to Drill

El Paso Products, Co. From:

Odessa Natural Corporation



FEB 26 1980 OIL CON. COM. DIST.

For:	Odessa	Natural	Corpor	ration

18. I hereby certify that the RIGHAE SIGNED

President, Walsh Engineering and Prod

Corp. DATE

February 20, 1980

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE \_

\*See Instructions on Reverse Side