

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER DRY HOLE		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR ODESSA NATURAL CORPORATION ATTN: John Strojek		8. FARM OR LEASE NAME Duncan Navajo 2	
3. ADDRESS OF OPERATOR P. O. Box 3908 Odessa, Texas 79760		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310'FSL, 2310'FWL		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2-T26N-R17W N.M.P.M.	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5371'G.L., 5384'D.F., 5385'K.B.	12. COUNTY OR PARISH San Juan	13. STATE N.M.

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

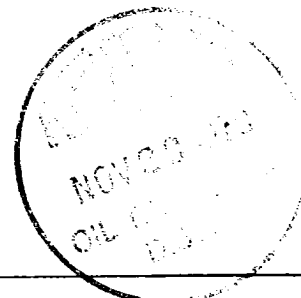
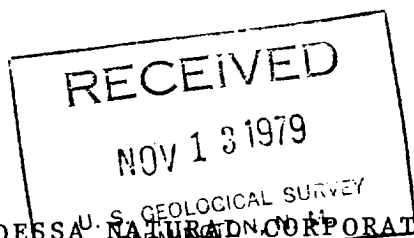
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>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

11/8/79 This well was plugged and abandoned in the following manner:

- Cement plugs
 - 4510'-4610', 50 sacks
 - 3590'-3690', 50 sacks
 - 1750'-1850', 50 sacks
 - 330'-430', 50 sacks

- Set 10 sack cement plug at surface with Dry Hole Marker.



FOR: ODESSA NATURAL CORPORATION
U.S. GEOLOGICAL SURVEY

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

SIGNED EWELL N. WALSH

President, Walsh Engr. & Prod. Corp.

DATE 11/8/79

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

*See Instructions on Reverse Side

NMOCC