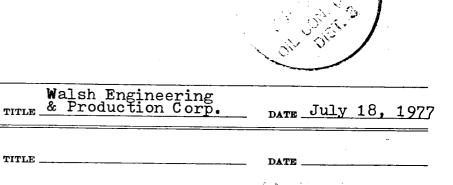
Form 221 (May 1968)	UNITED STATES DEPARTMENT OF THE INTER	SUBMIT IN TRIPLICATES RIOR (Other instructions on re-	Form approved. Budget Bureau No. 42-R1424. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY		NM-28760
SUND (Do not use this for	RY NOTICES AND REPORTS rm for proposals to drill or to deepen or plug Jse "APPLICATION FOR PERMIT—" for such	ON WELLS s back to a different reservoir. proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE WAME
OIL GAR WELL WELL	OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
Odessa Natural Corporation			Little Federal
8. ADDRESS OF OPERATOR			9. WELL NO.
P.O. Box 3908, Odessa, Texas 79760			4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT CT ; f
At surface			Undesignated Pictured
			11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
1115°FNL, 1710°FWL			Sec. 1-T30N-R14W
14			N.M.P.M.
14. PERMIT NO.	15. ELEVATIONS (Show whether I		12. COUNTY OF PARISH 18. STATE
	5871 GR, 5881	DF, 5892 KB	San Juan New Mexico
16.	Check Appropriate Box To Indicate	Nature of Notice, Report, or O	
NOWIGE OF COMPANY TO .			ENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CABING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) Squeeze	
(Other)		(NOTE: Report results of	of multiple completion on Well tion Report and Log form.)
17. DESCRIBE PROPOSED OR CO proposed work. If we nent to this work.) *	MPLETED OPERATIONS (Clearly state all pertine ell is directionally drilled, give subsurface loc	nt dotalla 3-4 4	
5-18-77	PBTD - 1818 Perforated Pictured Cliffs 1648 - 1664, 2 shots per foot. Acidize perforations and swab test. Recovering water with slight amount of gas.		
5-20-77	PBTD - 1628 Squeeze perforations Class "B" Cement thro	1648'-1664' with 35 ugh retainer set at	5 sxs t 1628'.



For: Odessa Natural Corp.

18. I hereby certify that the foregoing is true and correct SIGNED Jim Botkins, Engineer

(This space for Federal or State office use)