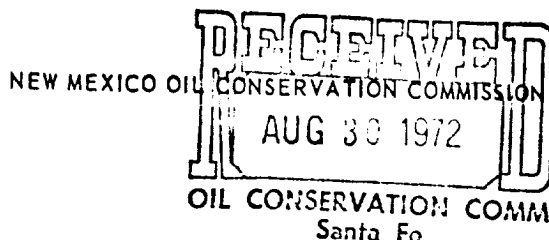


NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	



Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒
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.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- **RECOMPLETION ATTEMPT**

2. Name of Operator
ODESSA NATURAL CORPORATION

3. Address of Operator
P. O. Box 3908, Odessa, Texas 79760

4. Location of Well
UNIT LETTER **M** **342** FEET FROM THE **West** LINE AND **537** FEET FROM
THE **South** LINE, SECTION **24** TOWNSHIP **29N** RANGE **19E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
GR 7271' KB 7284'

7. Unit Agreement Name
8. Farm or Lease Name
Odessa Natural Corp.
W S Ranch
9. Well No.
3
10. Field and Pool, or Wildcat
Wildcat
12. County
Colfax

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER **Sandwater fracture treatment** ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

AUGUST 10, 1972 TD 5084' PBTD 2914' COTD 2551'

Perforated 7" OD casing 2275'-2279' and 2303'-2317' - 1 JSPF
Sandwater fractured perforations w/14,222 gals. 2% CaCl₂ water w/1#/1,000 gals. FR-18 & 8,500#
20-40 sand and 500 Scf/bbl. CO₂. BDP 2000 psi. MTP 2500 psi. IR 34 BPM.
Formation sanded off w/4500# sand in fm - Reversed out sand. Well died - Shut well in.

AUGUST 26, 1972

Rigged up swabbing unit. Well dead. No fluid in well.

Distribution:

3/NMOCC-Santa Fe, 1/WSRanch, 1/RLH, 1/JH, 1/JJS, 1/WF

I, I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED John J. Strojek
JOHN J. STROJEK/s6

TITLE MANAGER - PRODUCTION DEPT.

DATE 8/29/72

APPROVED BY J. E. Kaptina
CONDITIONS OF APPROVAL, IF ANY:

TITLE Oil & Gas Inspector
State ID

DATE 8/30/72