NO. OF COPIES RECEIVED	Form C-103 Supersedes Old
DISTRIBUTION חול של ביו	C-102 and C-103
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE 1 1072	Ju Indicate Type of Lease
U.S.G.S. AUG 1 : 1972	Fee X
OPERATOR OIL CONSERVATION CO	
OPERATOR OIL CONSERVATION CO	, THE 41.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUE BACK TO A DIFFERENT RESERVOIR.	
USE "APPLICATION FOR PERMIT _" (FORM C-101) FUR SUCH PROPERTY.	7. Unit Agreement Name
OIL GAS OTHER. DRY HOLE	
2. Name of Operator	Odessa Natural Corp.
ODESSA NATURAL CORPORATION	W S Ranch
3. Address of Operator	9. Well No.
P. O. Box 3908, Odessa, Texas 79760	4-X
4. Location of Well	10. Field and Pool, or Wildcat Wildcat
UNIT LETTER N 1900 FEET FROM THE West LINE AND 990 FEET FROM	······································
·	
THE South LINE, SECTION 12 TOWNSHIP 29N RANGE 18E NMPM.	
	12. County
15. Elevation (Show whether DF, RT, GR, etc.) GR 7841' KB 7854'	Colfax
Check Appropriate Box To Indicate Nature of Notice, Report or Oth	ier Data
NOTICE OF INTENTION TO: SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	ALTERING CASING PLUG AND ABANDONMENT
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMEN
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JQB	. Г
OTHER	
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposi
work) SEE RULE 1103.	
AUGUST 11, 1972 TD 6394' PBTD 6394'	
13 (-11	
It is proposed to plug and abandon this well as follows:	
(1) Cut off and pull the 7" OD casing @ the free point.	
(2) Set 20 sx regular cement plug on top of 7" OD casing stub.	
(3) Cut off and pull the 9-5/8" OD casing @ the free point.	
(4) Set 40 sx regular cement plug on top of 9-5/8" OD casing stub.	
•	
(5) Set 50 sx regular cement plug 90' to 190' (bottom of surface ca	asing).
(6) Set 5 sx regular cement plug @ surface w/4" OD x 4' high dry l	note marker.
Distribution:	
3/NMOCC Santa Fe, 1/WSRanch, 1/RIII, 1/JII, 1/JJS, 1/WFile 18.1 hereby certify that the information above is true and complete to the best of my knowledge and belief.	
16. I hereby certify that the information above is true and complete to the best of my missings and an arrangement of the best of my missings and arrangement of the best of my missings are also as a second of the best of my missings are also as a second of the best of my missings are a second of the best of my missings are a second of the best of my missings are a second of the best of the best of my missings are a second of the best of the best of my missings are a second of the best of the b	
MANAGER - PRODUCTION DEP	T. 8/10/72
SIGNED TOUR I STROLLEN SO	
Maile	011
15 Toptema Wal & Jas Ameleton	DATE 8/13/72
APPROVED BY	
CONDITIONS OF AMPROVAL, IF ANY:	•