	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	1	CONSERVATION COMP FOR ALLOWABLE AND	нгиом	Dorm C+104 Superseder Old Effective 1-4-6	
	DISTORER OIL AND HATURAL GAS OPERATOR					
1.	Operation Office					
	ODESSA NATURAL CORPORATION Attn: John Strojek					
	P. O. Box 3908 Odessa, Texas 79760 Reason(s) for filing (Check proper box) Other (Please explain)					
	New Well Change in Transporter of:					
	Recompletion Cil Dry Gas Change in Ownership Castinghead Gas Condensate					
	If change of ownership give name					
	and address of previous owner					
11.	DESCRIPTION OF WELL AND Lease Name Jicarilla Joint					Lease No.
	Venture "KD"	8 Chacon Dakota	Associated	State, Federal or F	State, Federal or Fee Apache NONE	
	Unit Letter P 165	50 Feet From The South Lir	1850	Feet From The	West	
	Line of Section 4 Tow	wnship 23N Range	3W , NMPN	, Rio A	Arriba	County
***	DECICNATION OF TRANSPORT	TER OF OU AND NATURAL GA	16			
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil					
	Giant Refining, Inc. P.O. Box 256, Farmington, N.M. 87401 Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)					
	El Paso Natural Gas Company P. O. Box 990, Farmington, N.M. 87401					,,
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. P 4 23N 3W	Is gas actually connect NO	•	cnown	
	<u></u>	th that from any other lease or pool,	give commingling orde	r number:		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover		g Back Same Res	'v. Diff. Res'v.
	Designate Type of Completion		X Total Depth		3.T.D.	_i
	Date Spudded 4/17/80	Date Compl. Ready to Prod. 5/25/80	7645'	F.5	7507 '	
	Elevations (DF, RKB, RT, GR, etc.) 7215 KB.	Name of Producing Formation Dakota	Top Oil/Gas Pay 7221'	Tub	Tubing Depth 7584 *	
	Perforations 7221'-7264'; 7288'7290			Depth Casing Shoe 7222		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ET	SACKS CEMENT	
	12-1/4"	8-5/8" 4-1/2"	280'		250 700	
	7-7/8"	4-1/2	7627		7 00	
		2-3/8"	7584'	<u> </u>		
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
	6/2/80 Length of Test	6/8/80 Tubing Pressure	Flowing Casing Pressure Ch		Choke Size	
	24 hrs.	800 psig	1850 psi	a	3/4"	
	Actual Prod. During Test	OII-Bble. 55	Water-Bble. G		700	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF		Controlly of Condensate	
	Town Market toward back made	Tubing Pressure (Shut-18)	Casing Pressure (Shui	i-in)	Size	

I hereby certify that the rules and regulations of the Oil Conservation

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Date)

FOR: ODESSA NATURAL CORPORATION ORIGINAL SIGNED BY EWELL N. WALSH

Ewell N. Walsh, P.E. (Signature) President

Walsh Engineering & Prod, Corp. (Title)

6/11/80

VI. CERTIFICATE OF COMPLIANCE

This form is to be filed in compliance with RULE 1104.

SUPERVISOR DISTRICT # 5

OIL CONSERVATO JUN 1 9 1980

TITLE _

Original Signed by FRANK T. CHAVEZ

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.