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JUL 15 1983

O. C. D.

5a. Indicate Type of Lease	
State ☐	Fed ☒
5. State Oil & Gas Lease No.	

SUNDARY NOTICES AND REPORTS ON WELLS, OFFICE
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK INTO DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL ☐ GAS ☒ OTHER ☐		7. Unit Agreement Name
2. Name of Operator DEPCO, Inc. ☒		8. Farm or Lease Name Rose Federal Com.
3. Address of Operator 800 Central, Odessa, Texas 79761		9. Well No. 13
4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>5S</u> RANGE <u>25E</u> NMPM.		10. Field and Pool, or Wildcat Pecos Slopes Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3795GR		12. County Chaves

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

PERFORM REMEDIAL WORK ☐	FLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER <u>Perf. & Frac.</u> ☐

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.

- 6-29-83 Tested 4 1/2" csg. @ 1000# for 30 min. Tested OK. Drld out: cmt. to 4140' PBTD.
Perf w/1 - .41" hole @ 3721-29', 32', 53-61', 3855-60', 64-68', 85', 87-89'.
- 6-30-83 Acidized perms from 3855-89' w/1500 gals. 7 1/2% Abo acid w/1000 SCF-N₂ P/bbl.
Acidized perms from 3721-61' w/1900 gals. 7 1/2% Abo acid w/1000 SCF-N₂ P/bbl.
- 7-1-83 Frac well w/68,000 gals. YF-4 w/20% Co₂, 98,000# 20/40 sd., & 62,000# 10/20 sd.
Preparing to start testing.

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

SIGNED R.L. Denney R.L. Denney TITLE Chief Prod. Clerk DATE 7-14-83
Original Signed by Leslie A. Clements
Supervisor District II
APPROVED BY _____ TITLE _____ DATE JUL 18 1983
CONDITIONS OF APPROVAL, IF ANY: