

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

**NM 05523**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

**High Lonesome Penrose**

8. FARM OR LEASE NAME

**High Lonesome Penrose Unit**

9. WELL NO.

**2**

10. FIELD AND POOL, OR WILDCAT

**High Lonesome**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

**Sec. 15, T-16S, R-29E**

**NMPM**

12. COUNTY OR PARISH

**Eddy**

13. STATE

**New Mex.**

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR

**DEPCO, Inc.**

3. ADDRESS OF OPERATOR

**800 Central, Odessa, Texas 79760**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

**1980 FN & EL, Sec. 15, T-16S, R-29E**

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

**3700**

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

**Well Shut-in**

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

**7-1-71 Shut well in due to high water oil Ratio.  
Last test prior to shut-in was 4.5 BO & 289 BW.**

**RECEIVED**

**APR 21 1972**

**U.S. GEOLOGICAL SURVEY  
EDDY, NEW MEXICO**

18. I hereby certify that the foregoing is true and correct

SIGNED

**D. R. Mason**

TITLE **Chief Clerk**

DATE **4-20-72**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**APPROVED**  
**APR 24 1972**  
**R. L. BEEKMAN**  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side