TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

ABANDON\*

## UNITED STATES DEPARTMENT OF THE | **GEOLOGICAL SURV**

DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE SF 078064 6. IFINDIAN, ALLOTTEE OR TRIBE NAME
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME  CARSON LINIT  8. FARM OR LEASE NAME
1. oil well well other  2. NAME OF OPERATOR  Shell Oil Company  3. ADDRESS OF OPERATOR ATTN: P.G.Gelling  POBOX 831 HOUSTONTX 77001 RM. # LYS9 WCK  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  AT SURFACE: 1500 FNL + 800 FWL Sec.13  AT TOP PROD. INTERVAL:  AT TOTAL DEPTH:	9. WELL NO.  12X-13 (201)  10. FIELD OR WILDCAT NAME  BIST!  11. SEC., T., R., M., OR BLK. AND SURVEY OR  AREA  NM, PM T2SN RIZW  12. COUNTY OR PARISH 13. STATE  SAN JUAN NEW MEXICO.  14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF	15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

AUG 09 1982

(other) CHANGE PLANS 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.)\*

REGARDING your letter of July 14,1982 Please cancel our INTENT TO ABANDON CARSON UNIT NO. 201 (12x-13) DATED NOVEMBER

Subsurface Safety Valve: Manu. and Type	Set @ Ft.	
18. I hereby certify that the foregoing is true and correct		
SIGNED TITLE DIV. PROD. ENG. DATE  On the same for Federal or State office use)	8-3-82	
JAMES F. SIMS DISTRICT ENGINEER		
*See Instructions on Reverse Side		