

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-11424.

5. LEASE DESIGNATION AND SERIAL NO.
Phillips Pet Co. No. 2
14-20-603-1284
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Hoska YeCa Wood Price

7. UNIT AGREEMENT NAME

Carson Unit

8. FARM OR LEASE NAME

5

9. WELL NO.

21 - 18

10. FIELD AND POOL, OR WILDCAT

Bisti

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

T25N, R11W

12. COUNTY OR PARISH

San Juan

13. STATE

N. M.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Shell Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 831, Houston, Texas 77001

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

660' FNL & 1973' FWL of Sec. 18
T25N, R11W, N.M.P.M., San Juan Co., N.M.

14. PERMIT NO.

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

6353.1' K.B.

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) Temporarily Abandon

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporary Abandon

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

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.)*

Subject well temporarily abandoned and held pending conclusion of investigation regarding methods for additional recovery. Pertinent data given below:

1. Current status of well
2. Date of last use
3. Reason for TA
4. Future plans
5. Approximate date of future operations

Shut-in
1969
Uneconomic operation
Reference letter of transmittal
Reference letter of transmittal



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

SIGNED

G. J. Karner

TITLE

Division Operations Engineer

DATE

10/25/74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: