

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-11424.5. LEASE DESIGNATION AND SERIAL NO.
L.M. Phillips No. 1

SF 078063

6. IF INDIAN, 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME Carson Unit
2. NAME OF OPERATOR Shell Oil Company	8. FARM OR LEASE NAME =
3. ADDRESS OF OPERATOR P. O. Box 831, Houston, Texas 77001	9. WELL NO. 3-07
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1813' FSL & 530' FWL of Sec. 7, T25N, R11W, NMEM, San Juan Co., N.M.	10. FIELD AND POOL, OR WILDCAT Bisti
	11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA T25N, R11W
14. PERMIT NO.	12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6317.38' K.B.	13. STATE N. M.

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 ☐☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

Temporary Abandon ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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
1970
Uneconomic operation
Reference letter of transmittal
Reference letter of transmittal



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

SIGNED [Signature]TITLE Division Operations EngineerDATE 10/25/74

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: