

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil ☐ gas ☒ other ☐

2. NAME OF OPERATOR
SCHALK DEVELOPMENT COMPANY

3. ADDRESS OF OPERATOR
P. O. BOX 25825

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 790' FSL, 790' FWL
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	TEST WATER SHUT-OFF	FRACTURE TREAT	SHOOT OR ACIDIZE	REPAIR WELL	PULL OR ALTER CASING	MULTIPLE COMPLETE	CHANGE ZONES	ABANDON*	(other) DRILLING
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

5. LEASE

NM-23041

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Schalk 41

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Blanco Mesa Verde

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

Sec. 16, T25N, R3W

12. COUNTY OR PARISH 13. STATE

Rio Arriba New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

7316 GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

1/30/79 Set 152 Joints 10.5# 4-1/2" casing @ 6207' KBM.
Cemented with 140 sxs Howco - 12-1/2# Gilsonite
per sx. Cemented with 170 sxs 50/50 Posmix -
7# Gilsonite per sx.

Plug down @ 4:00 p.m.
Float @ 6163'

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

JOHN E. SCHALK

TITLE Managing Partner

DATE 1/31/79

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY