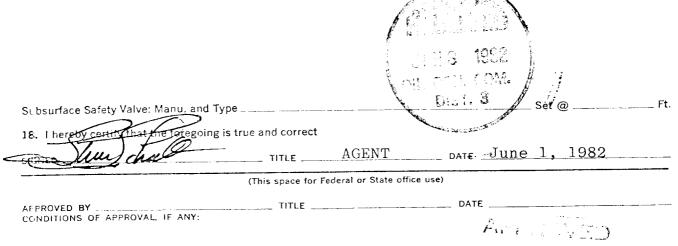
## HNITED STATES

| ONITED STATES                                                                                                                                                                                          | 5. LEASE                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY                                                                                                                                                          | NM 23043  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 eservoir. Use Form 9-331-C for such proposals.)                              | 7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME                                |
| 1. oil gas KK other                                                                                                                                                                                    | SCHALK 43 9. WELL NO.                                                        |
| 2. NAME OF OPERATOR SCHALK DEVELOPMENT CO. 3. ADDRESS OF OPERATOR                                                                                                                                      | 1<br>10. FIELD OR WILDCAT NAME<br>WILDCAT 7770                               |
| P.O. BOX 25825 / ALBUQUERQUE, NM 87125  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17                                                                                                     | 11. SEC., T., R., M., OR BLK. AND SURVEY OR                                  |
| below.) 790' FSL; 1850'FEL Sec.26,T-25N AT SURFACE: R-3W AT TOTAL DEPTH:                                                                                                                               | Sec. 26, T-25N, R-3W  12. COUNTY OR PARISH 13. STATE NEW MEXICO  14. API NO. |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA                                                                                                                          | 15. ELEVATIONS (SHOW DF, KDB, AND WD)                                        |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  (other) See Below | (NOTE: Report results of multiple completion or zone change on Form 9–330.)  |

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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.)\*

We request an extension of 6 months for our Permit to 6/1/82 Drill for the proposed location. extended to 12/18/82



\*See Instructions on Reverse Side

**NMOCC**