

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

M.R. SCHALK

3. Address of Operator

P.O. Box 25825, Albuquerque, N.M.

4. Well Location

Unit Letter I : 2310 Feet From The South Line and 330 Feet From The East Line

Section 34

Township 25N

Range 3W

NMPM

Rio Arriba

County

10. Elevation (Show whether DI, RKB, RT, GR, etc.)

7158' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Surface Casing ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Spud a 12 $\frac{1}{4}$ " hole on 4-24-89 @ 0745 hrs. Set 9 5/8 36# Surface Casing at 255'.  
Cemented with 170 sxs. 65/35/6 containing 3% cac1. Nipple up and pressure test casing  
to 500 psi. Circulated cement to surface.

RECEIVED

JUL 24 1989

OIL CON. DIV  
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Steve Schalk

TITLE Agent

DATE 7-21-89

TYPE OR PRINT NAME

TELEPHONE NO. (505)881-6649

(This space for State Use)

APPROVED BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT 3

DATE

JUL 24 1989

CONDITIONS OF APPROVAL, IF ANY: