Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM - 4452

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.

OIL WELL ☐   GAS WELL ☒   OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
LONE STAR INDUSTRIES, INC. C/O JOHN E. SCHALK

8. FARM OR LEASE NAME
SCHALK - 52

3. ADDRESS OF OPERATOR
P. O. BOX 2078, FARMINGTON, NEW MEXICO

9. WELL NO.
1

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

910' FROM WEST LINE, 790' FROM SOUTH LINE
SECTION 24, TOWNSHIP 29 NORTH, RANGE 5 WEST

10. FIELD AND POOL, OR WILDCAT
PICTURED CLIFFS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 24, T29N, R5W
N.M.P.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6525'

12. COUNTY OR PARISH RIO ARRIBA
13. STATE NEW MEXICO

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)

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) CHANGE OPERATOR NAME ☒☒

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.) *

NO. 2 CHANGE DESIGNATION OF OPERATOR:

FROM: Lone Star Industries, Inc.
            c/o John E. Schalk
            P. O. Box 2078
            Farmington, New Mexico   87401

TO: Coastline Petroleum Company, Inc.
            c/o John E. Schalk
            P. O. Box 2078
            Farmington, New Mexico   87401

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

SIGNED [signature]   TITLE _____   DATE 10/2/74

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side