

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR
JOHN E. SCHALK

3. ADDRESS OF OPERATOR
P. O. BOX 2078, FARMINGTON, NEW MEXICO 4014

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
890' FROM THE SOUTH LINE, 865' FROM THE WEST LINE
SEC. 32, T 29N, R 4W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7386' GR

5. LEASE DESIGNATION AND SERIAL NO.
USA NM 18328

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
SCHALK 29-4

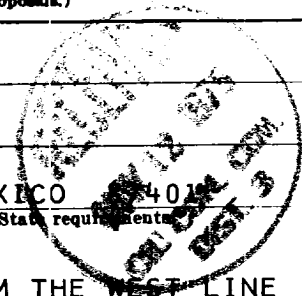
9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
BASIN DAKOTA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 32, T 29N, R 4W

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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	WELL HISTORY <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

SCHALK 29-4 WELL NO. 1 WAS SPUDED AT 7:00 PM ON APRIL 26, 1975.

TOTAL DEPTH ON 4-27-75 OF SURFACE HOLE - 325'.

RAN 6 JOINTS TOTALING 327.30' OF 12-3/4" OD CASING. SET CASING AT 325 RKB. CEMENTED WITH 230 SACKS OF CLASS "B" CEMENT WITH 3% CALCIUM CHLORIDE AND 1/4# FLOSEAL PER SACK. PLUG DOWN AT 6:45 AM ON 4-27-75. CEMENT CIRCULATED.

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

SIGNED

TITLE

OPERATOR

DATE 5-6-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: