

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

30-039-21140

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			5. LEASE DESIGNATION AND SERIAL NO. USA NM 18328
b. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>			6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----
2. NAME OF OPERATOR John E. Schalk			7. UNIT AGREEMENT NAME -----
3. ADDRESS OF OPERATOR P. O. Box 26687, Albuquerque, N. M. 87125			8. FARM OR LEASE NAME Schalk 29-4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)* At surface 850' from the South line, 1080' from the East line At proposed prod. zone Section 32, Township 29 North, Range 4 West			9. WELL NO. 2
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 40 Miles East of Bloomfield, New Mexico			10. FIELD AND POOL, OR WILDCAT Wildcat <i>Pictured Cliffs</i>
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)	850'	16. NO. OF ACRES IN LEASE 640	17. NO. OF ACRES ASSIGNED TO THIS WELL 160
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.	1/2 mile	19. PROPOSED DEPTH 4392	20. ROTARY OR CABLE TOOLS Rotary
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 7329' GR			22. APPROX. DATE WORK WILL START* 9-15-75

## 23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	8-5/8"	23#	150'	150 Sacks
7-7/8"	4-1/2"	10.5#	4392'	300 Sacks

## ESTIMATED TOPS

Ojo Alamo	3567'
Kirtland	3802'
Fruitland	3942'
Pictured Cliffs	4192'



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. John E. Schalk SIGNED Operator TITLE 9-2-75 DATE

(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:*at*

\*See Instructions On Reverse Side

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

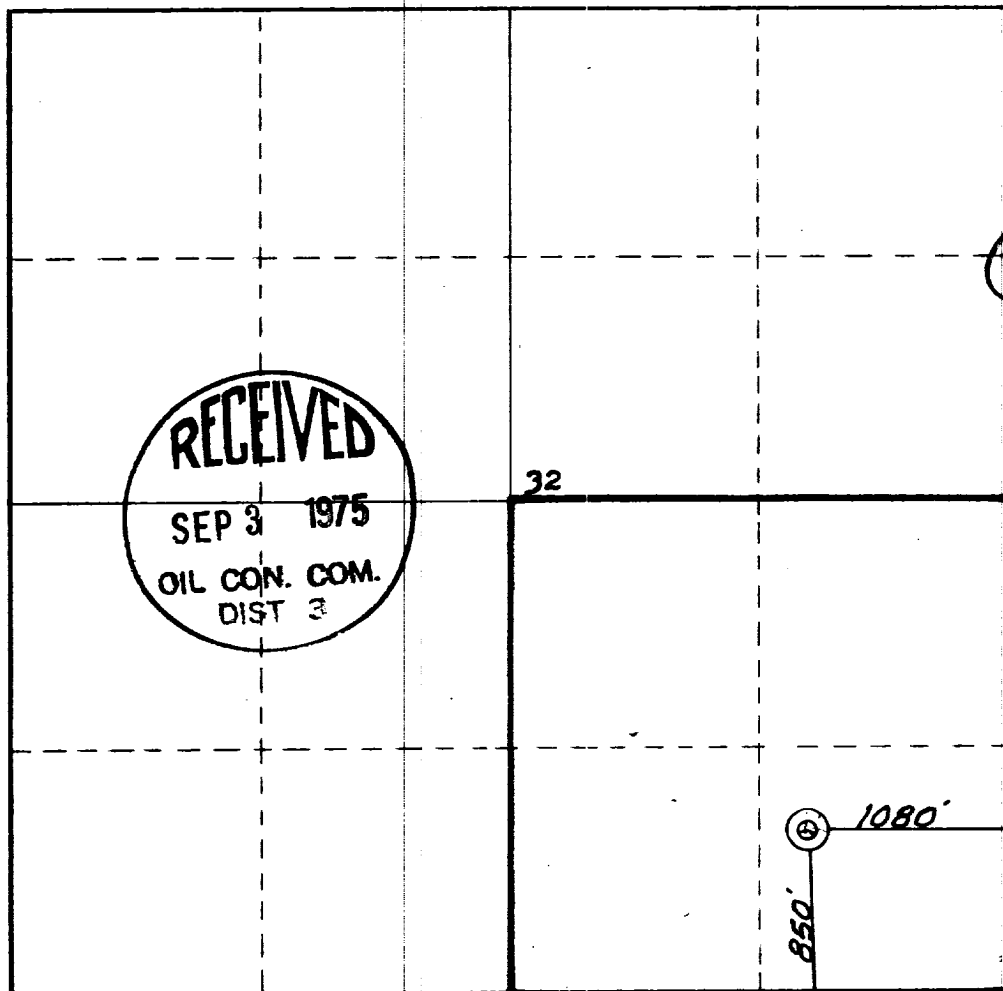
Operator <b>JOHN E. SCHALK</b>		Lease <b>29-4</b>		Well No. <b>29-4 #2</b>
Unit Letter <b>P</b>	Section <b>32</b>	Township <b>29 NORTH</b>	Range <b>4 WEST</b>	County <b>RIO ARriba</b>
Actual Footage Location of Well: <b>850</b> feet from the <b>SOUTH</b> line and <b>1080</b> feet from the <b>EAST</b> line				
Ground Level Elev. <b>7329</b>	Producing Formation <b>PICTURED CLIFF</b>	Pool <b>WILDCAT</b>	Dedicated Acreage: <b>160</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

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

*John E. Schalk*  
Name

Position

**OPERATOR**

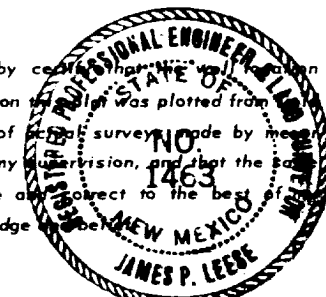
Company

**JOHN E. SCHALK**

Date

**9-2-75**

I hereby certify that the survey shown on this plat was plotted from notes of a survey made by me under my supervision, and that the same is true and correct to the best of my knowledge.



Date Surveyed

**20 August 1975**

Registered Professional Engineer and/or Land Surveyor

*James P. Leese*  
**James P. Leese**

Certificate No.

**1463**