UNITED STATES DEDADTMENT OF THE INTERIOR

D. LEASE	/	
	NM	18322

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DEFARTMENT OF THE INTERIOR	/ NM 10322				
GEOLOGICAL SURVEY	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 reservoir. Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME				
reservoir, use rottin 5-351-C for such proposals.	8. FARM OR LEASE NAME				
1. oil gas 🔀 other	SCHALK 29-4				
Well Well Care	9. WELL NO.				
2. NAME OF OPERATOR	10				
M.R. SCHALK	10. FIELD OR WILDCAT NAME				
3. ADDRESS OF OPERATOR	BLANCO MESAVERDE				
P O BOX 25825/ALBUQUERQUE, NM 87125	11. SEC., T., R., M., OR BLK. AND SURVEY OR				
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA				
below.)	SEC. 23, T-29N, R-4W				
AT SURFACE: SW/4 SW/4 SEC. 23	12. COUNTY OR PARISH 13. STATE				
AT TOTAL DEPTH	RIO ARRIBA NEW MEXICO				
AT TOTAL DEPTH: 940' FSL; 800' FWL; SEC 23	14. API NO.				
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,					
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)				
	7322' G R				
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	Literature - 2.6				
IEST WATER SHUT-OFF U	II (In I)				
FRACTURE TREAT	IV Salar				
SHOOT OR ACIDIZE					
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.) -				
	ON N AS				
CHANGE ZONES	ON, IV. IV.				
(other) SET SURFACE CASING					
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinen	rectionally drilled, give subsurface locations and				
2/11/82					
RAN 6 JTS ST&C 23# 8 5/8" SURFACE CAS	ING, AND 1 JT 24# 8 5/8"				
SURFACE CASING. SET AT 307'					
CEMENTED W/210 SKS CLASS 'B' 2% CALCID	UM CHLORIDE.				
CIRCULATED TO SURFACE.					
	2 - 1				
	The state of the s				
	그는 그를 가는 사람이 있다. 이번 여행,				
	and the company of th				
	The second secon				
Subsurface Safety Valve: Manu. and Type	Set @ Ft.				
18. I hereby certify that the foregoing is true and correct					
AGENT AGENT	2/26/82				

(This space for Federal or State office use)

_ TITLE .

APPROVED BY _______ CONDITIONS OF APPROVAL IF ANY:

MAR 03 1982

*See Instructions on Reverse Side