

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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.)

1. oil well ☐ gas well ☒ other
2. NAME OF OPERATOR  
M.R. SCHALK
3. ADDRESS OF OPERATOR  
P O BOX 25825 / ALBUQUERQUE NM 87125
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: SW/4 SW/4 SEC. 23  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: 230' FSL; 800' FWL; SEC 23
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## REQUEST FOR APPROVAL TO:

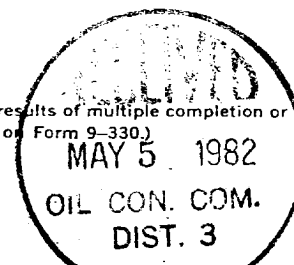
- TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

(other) set production casing

## SUBSEQUENT REPORT OF:

<input type="checkbox"/>	RECEIVED
<input type="checkbox"/>	DATE
<input type="checkbox"/>	BY
<input type="checkbox"/>	APPROVED

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



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.)\*

Reached TD @6592'

3/6/82 RAN 166 JTS 11.60 L.T. &amp; C. 4 1/2" production casing. Set @6592' KBM

Cemented in two stages:

1st. 550 sks Class 'B' 2% C.C., 6 1/4# Gilsonite, 1/4# Floccel and 8% Salt.

2nd. 380 sks Howco Lite, 6 1/4# Gilsonite, and 8# Salt P/sk. Followed w/190 sks Class 'B' neat.

10 bbl mud flush before each stage.

Circulated to surface.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED STEVE SCHALK TITLE Agent DATE 4/30/82

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

MOCC

MAY 1982  
BY Shn