

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-B1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 4454

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

SCHALK 54

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

BLANCO MESA VERDE

11. SEC., T., R., M., OR BLK AND SURVEY OR AREA

SEC. 2, T-30N, R-5W

12. COUNTY OR PARISH 13. STATE

RIO ARRIBA N. MEX.

1.

OIL WELL ☐ GAS WELL ☒ OTHER ☐

2.

NAME OF OPERATOR

LONE STAR INDUSTRIES, INC.

3.

ADDRESS OF OPERATOR

%JOHN E. SCHALK, P. O. BOX 2078, FARMINGTON, N. M.

4.

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

1650' FROM THE SOUTH LINE, 790' FROM THE EAST LINE  
SECTION 2, TOWNSHIP 30 NORTH, RANGE 5 WEST

14. PERMIT NO.

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

6569' GR

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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

WELL HISTORY

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

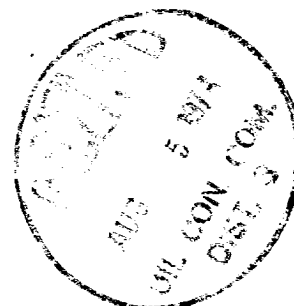
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface location and measured and true vertical depths for all markers and zones pertinent to this work.)

SCHALK 54 WELL NO. 2

SPUDDED AT 5:00 PM ON 7-9-74

7-10-74 TD - 310'

RAN 7 JOINTS OF 8-5/8" 32.0# KS, 8 RD CASING TOTALING 295'  
SET AT 308' RKB. CEMENTED WITH 250 SACKS CLASS "B" WITH 1/4#  
FLO-SEAL AND 2% CALCIUM CHLORIDE PER SACK. PLUG DOWN AT 7:15 AM  
ON 7-10-74. CEMENT CIRCULATED.



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

SIGNED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

AGENT

DATE 7-17-74