Form 9-331 (Mer 1963)

UNITED STATES UNITED STATES BUBMIT IN TRIPLICATE® (Other instructions on reverse side) GEOLOGICAL SURVEY

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTER OR TRIBE NAME

NM - 4455

(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.)

%JOHN E. SCHALK, P. O. BOX 2078, FARMINGTON, N. M. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below:

980' FROM THE NORTH LINE, 1180' FROM THE EAST LINE

			- -	- -		 _
7.	UNIT	AGRE	EME	NT I	NAME	

WELL I WELL X OTHER

8. FARM OR LEASE NAME

SCHALK 55

9. WBLL NO.

2

10. FIELD AND POOL, OR WILDCAT

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

SEC. 3, T-30N, R-5W

12. COUNTY OR PARISH 13. STATE

NEW MEXICO RIO ARRIBA

14. PERMIT NO.

REPAIR WELL

Others

NAME OF OPERATOR

LONE STAR INDUSTRIES, INC.

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

6486'

16

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO: PULL OR ALTER CASING TEST WATER SHUT-OFF MULTIPLE COMPLETE

CHANGE PLANS

REPAIRING WALL WATER SHUT-OFF AUTERING CASING PRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) WELL HISTORY (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

SUBSEQUENT REPORT OF:

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 55 WELL NO. 2

SPUDDED 11:00 PM ON 8-7-74

310' 8-8-74 TD

> RAN 7 JOINTS OF 8-5/8' 32# CASING TOTALING 292.92' SET AT CEMENTED WITH 210 SACKS OF CLASS "A" WITH 1/4# FLOSEAL PER SACK WITH 2% CALCUIM CHLORIDE. CEMENT CIRCULATED. PLUG DOWN AT 1:45 PM ON AUGUST 8, 1974.

18. I hereby certify that the forego	oing is true and agreect				
SIGNED TURE	oing is true and correct	AGENT	DATE	-16-74	
(This space for Federal or Stat	te office use)		<u> </u>	<u> </u>	
APPROVED BY	IF ANY:		DATE		

*See Instructions on Reverse Side

AUG 20 1974

\$ 10 m 350 m 10 will 1.57