

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1494.

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 4462
2. NAME OF OPERATOR LONE STAR INDUSTRIES, INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR %JOHN E. SCHALK, P. O. BOX 2078, FARMINGTON, N.M.		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1170' FROM THE SOUTH LINE, 790' FROM THE EAST LINE		8. FARM OR LEASE NAME SCHALK 62
14. PERMIT NO.		9. WELL NO. 3
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6301.0' GR		10. FIELD AND POOL, OR WILDCAT BLANCO MESA VERDE
		11. SEC., T., R., M., OR BLM AND SURVEY OR AREA SEC. 33, T-32N, R-5W
		12. COUNTY OR PARISH RIO ARriba
		13. STATE NEW MEXICO

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>WELL HISTORY</u> <input checked="" type="checkbox"/>	

(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 locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

SCHALK 62 WELL NO. 3

SUDDEN ON 9-1-74

9-19-74 - TD 5850'

RAN 50 JOINTS OF K-55, 10.5# 4-1/2" CASING AND 98 JOINTS OF LIMITED SERVICE 10.5# 4-1/2" CASING TOTALING 148 JOINTS TOTALING 5886' SET AT 5850' RKB. A D.V. TOOL WAS SET AT 1994' AND 3868'. CEMENTED FIRST STAGE WITH 220 SACKS LIGHTWEIGHT WITH 12-1/2# GILSONITE PER SACK AND 160 SACKS POSMIX WITH 12-1/2# GILSONITE PER SACK. CEMENTED SECOND STAGE WITH 286 SACKS LIGHTWEIGHT WITH 6% ADD. GEL AND 12-1/2# GILSONITE AND 1/4# FLOSEAL PER SACK. CEMENTED 3RD STAGE WITH 350 SACKS LIGHTWEIGHT WITH 6% ADD. GEL AND 12-1/2# GILSONITE AND 1/4# FLOSEAL PER SACK. ALL THREE STAGES CIRCULATED. PLUS DOWN AS FOLLOWS:

FIRST STAGE	8:00 AM	9-19-74
SECOND STAGE	11:30 AM	9-19-74
THIRD STAGE	12:15 PM	9-19-74

PERFORATIONS		ONE SHOT PER FOOT
5438' TO 5456'	5661' TO 5668'	
5608' TO 5628'	5680' TO 5689'	

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

SIGNED

TITLE

AGENT

DATE 9-24-74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: