Submit 3 Copies

State of New Mexico als and Natural Resources Department

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Revis	ed :	1-1	-89

to Appropriate District Office	Circigy, Minerals and Tracarda 2000			
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION P.O. Box 2088	3	WELL API NO.	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
OUNDRY NOT	ICES AND REPORTS ON WELI	S		
(DO NOT USE THIS FORM FOR PR	IOPOSALS TO DRILL OR TO DEEPEN (RVOIR. USE "APPLICATION FOR PER C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL [X] WELL	OTHER	,	School Briny	
Name of Operator M.R. Schalk		8. Well No.		
3. Address of Operator P.O. Box 25825, Albuquerque, NM 87125		9. Pool name or Wildcat West Lindrith GL/DK		
P.O. BOX 25825, 4. Well Location	Albuquerque, NM 8/1	2.5	West Hildrich Shysk	
Unit Letter : 23	10 Feet From The South	Line and 33	0 Feet From The East Line	
Section 34	Township 25N Rai	of RKR RT GR. etc.)	NMPM Rio Arriba County	
	7158' GL), into, in , on, on,		
Check	Appropriate Box to Indicate N	Nature of Notice, R	Report, or Other Data	
	ITENTION TO:	SUE	SEQUENT REPORT OF:	
. —		REMEDIAL WORK	ALTERING CASING	
PERFORM REMEDIAL WORK	PLUG AND ABANDON			
MPOPARILY ABANDON CHARGE I SAID				
PULL OR ALTER CASING			· · · · · · · · · · · · · · · · · · ·	
OTHER:		OTHER: Perforate, Acidize & Frac		
12. Describe Proposed or Completed Opework) SEE RULE 1103.	rations (Clearly state all pertinent details, an	d give pertinent dates, incl	uding estimated date of starting any proposed	
11/22/89 - Rig-up	Flint Engineering C	ompletion Ur	nit	
11/24/89 - Pull rods and TBG from well				
11/27/89 - Set drillable bridge plug @ 7180'/pressure				
Test plug to 3500 psi (20 mins) 60 in. hole w/TBG. to JAN 051990				
7140'/circulate no	F HCL/come out of ho	CL/spot le w/TBG.	_	
250 garrons / 1/2	nelly come out of me		OIL CON. DIV.	
			DIST. 3	
			en e	
I hereby certify that the information above	see and complete to the best of my knowledge and	I belief.	1 1/4/90	
SIGNATURE SOLL) p Hadel T	ne Ng en	DATE Y 1	
TYPE OR PRINT NAME			TELEPHONE NO.	
(This apace for State Use)			· ·	
	FRANK T. CHAVEZ	SUPERVISOR	DISTRICT IN II	
Otigitud Signed by		TLE		