

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No. 1004-0135
Expires January 31, 2004

5. Lease Serial No.
NM-4454
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

7. If Unit or CA/Agreement, Name and/or No.
FARMINGTON NM

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

8. Well Name and No.
SCHALK 54 #2005

9. API Well No.
3003927622

2. Name of Operator
SCHALK DEVELOPMENT Co.

10. Field and Pool, or Exploratory Area
Basin Fruitland Coal

3a. Address
P.O. Box 25825, ALBUQUERQUE, NM 87125

3b. Phone No. (include area code)
(505) 881-6649

11. County or Parish, State
RIO ARriba County, NM

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1,545' FSL + 765' FEL, SECTION 2, T-30N, R-5W

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other SET INTERMEDIATE CASING
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

CEMENT 3,147' OF 7", 23# INTERMEDIATE CASING ON SEPTEMBER 22, 2005 AS FOLLOWS:

CEMENT 1: 375 SACKS 65/35/STD/POZ CEMENT WITH 8% GEL, 1% C.C. AND 1/4# FLOCELE PER SACK. WEIGHT 12.30 LBS. PER GAL.; YIELD 2.09 CUFT. PER SACK; WATER 11.29 GAL. PER SACK.

CEMENT 2: 100 SACKS TYPE III CEMENT WITH 1% C.C. AND 1/4# FLOCELE PER SACK. WEIGHT 14.50 LBS. PER GAL.; YIELD 1.39 CUFT. PER SACK; WATER 6.40 GAL. PER SACK.

FULL CIRCULATION DURING ENTIRE CEMENT JOB.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

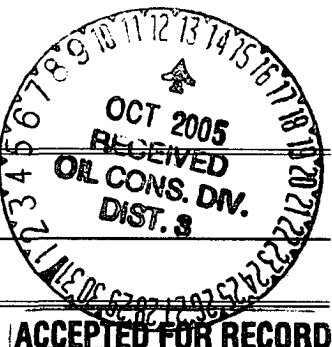
STEVE SCHALK

Title **MANAGER**

Signature

Date **09/26/05**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE



Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

OCT 11 2005

FARMINGTON FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any Department or Agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

NMOC