

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other
instructions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐	Other _____										
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____								
2. NAME OF OPERATOR John E. Schalk						7. UNIT AGREEMENT NAME									
3. ADDRESS OF OPERATOR P. O. Box 2078, Farmington, N.M. 87401						8. FARM OR LEASE NAME Lone Star Industries-									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 910'FWL, 790'FSL At top prod. interval reported below Same At total depth Same						9. WELL NO. Schalk 52									
14. PERMIT NO.						DATE ISSUED									
15. DATE SPUDDED 1-21-73		16. DATE T.D. REACHED 3-6-73		17. DATE COMPL. (Ready to prod.) 3-11-73		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6525'GR		19. ELEV. CASINGHEAD 6523'							
20. TOTAL DEPTH, MD & TVD 5811		21. PLUG, BACK T.D., MD & TVD 5778		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVAL NOT CABLED DRILLING		24. CABLE TOOLS							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3483'-3526'						25. WAS DIRECTIONAL SURVEY MADE No		26. WAS WELL CORED No							
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC, GNL, GR						27. WAS WELL CORED No									
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
1-5/8		24.0		314		12-1/4		200 sxx		None					
1-1/2		10.50		5810		7-7/8		1st Stg. -190 sxx		None					
								2nd Stg. -150 sxx		None					
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
1 one										2-3/8		3541			
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
3483'-3510' - 2 shts per foot										DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3516'-3519' - 2 shts per foot										3483-3526		54,020 gals. -50,000lbs sand			
3522'-3526' - 2 shts per foot															
33. PRODUCTION															
DATE: FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Waiting on Pipeline						WELL STATUS (Producing or shut-in) Shut In							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO	
3-29-73		3		3/4"		→									
FLO. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		OIL GRAVITY-API (CORR.)			
255		485		→				3/4"-3,386							
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) EAOP-3,989										TEST WITNESSED BY 111 4173					
35. LIST OF ATTACHMENTS															
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. Shut in pressures, Tubing - 1150 psig, Casing - 1175 psig.															
SIGNED		TITLE		DATE											
W. N. Walsh		Petroleum Engineer Consultant		3-30-73											

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference. (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertaining to such interval.

Item 29: "Stage Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Note: Well completed in Pictured Cliffs Formation. Two stage collar was not drilled out for completion in Mesa Verde.	Ojo Alamo Kirtland Pictured Cliffs Lewis Cliffhouse Point Lookout	2615 2855 3202 3470 3560 5350 5664	2615 2855 3202 3470 3560 5350 5664