		\		
HO. OF COPIES #10	LIVED.	 		7
DISTRIBUTION				1
SANTA FE			1	
FILE			1	
U.S.G.S.				1
LAND OFFICE			1	
IRANSPORTER	OIL			1
INANSPONTEN	GAS			7
OPERATOR			7	
PRORATION OF			7	
Operator				_
SCHALK	DEVE	LOI	PME	31
Address				_
P. O. E	OX 2	582	25	,

	DISTRIBUTION SANTA FE FILE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C- Ellective 1-1-65			
	U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR	AUTHORIZATION TO TR.	AND ANSPORT OIL AND NATURAL	-			
1.	PRORATION OFFICE Operator	<u> </u>					
	SCHALK DEVELOPMENT COMPANY						
		/ ALBUQUERQUE, NEW I	MEXICO 87125 Other (Please explain)	•			
	Reason(s) for filing (Check proper box New Well	Change in Transporter of:	One: Wittense Explains				
	Recompletion Change in Ownership XX	Cil Dry G Casinghead Gas Conde	Ħ l				
	If change of ownership give name and address of previous owner	ARAPAHOE DRILLING (CO. / P.O. BOX 26687	/ ALBUQ.,NM 87125			
11.	DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including F	ormation Kind of Leas	e Lease No.			
	SCHALK 49	1 1	Pictured Cliffs, Federa	L -			
	Location Unit Letter 0' : 850) Feet From The SOUTH Lis	ne and 1765 Feet From	The EAST			
				ARRIBA County			
				AKKIDA			
III.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro				
	Name of Authorized Transporter of Car NORTHWEST PIPELINE		Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1526/SALT LAKE CITY, UTAH 8411				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	en			
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:				
14.	Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v			
	Date Spudded 11/21/73	Date Compl. Ready to Prod. 12/13/73	Total Depth 4500	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top O!l/Gas Pay	Tubing Depth			
	7322 Perforations	Pictured Cliffs . 4033		4483 Depth Casing Shoe			
	4036-54, 406	4036-54, 4060-74, 4124-30, 4254-60					
	HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT			
	12-1/4	8-5/8	183	170			
	6-1/4	2-7/8	4483	450			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	and must be equal to or exceed top allow			
i	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, etc.)			
	Length of Teet	Tubing Pressure	Casing Pressure	Cheke Street			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF			
GAS WELL				3 1 1			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
FI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION			
	t harabu pagidu ihai sha sulaa and s	regulations of the Oll Conservation	APPROVED	JUN 12 1981			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Original Signed by FRANK T. CHAVEZ				
	1 ^ 6		TITLE				
(they's had	a 02	This form is to be filed in If this is a request for alloy	compliance with RULE 1104. vable for a newly drilled or deepener			

(Signature)

Јони Е. SCHALK, MANAGING PARTNER (Title)

6/5/81

(Date) *:*

well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multipl