

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐
-
2. NAME OF OPERATOR
SCHALK DEVELOPMENT COMPANY
-
3. ADDRESS OF OPERATOR
P O BOX 25825/ALBUQUERQUE, NM 87125
-
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: NE/4 NE/4 SEC. 26
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: 1120' FNL; 860' FEL; sec26
-
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other) SET SURFACE CASING	

RECEIVED
(NOTE: Rep
chan
MAR 01 1900
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

2/3/82

RAN 8 JTS 24# 8 5/8" SURFACE CASING. SET AT 305'

CEMENTED W/300 SKS CLASS 'B' 2% CALCIUM CHLORIDE.

CIRCULATED TO SURFACE.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

TITLE AGENT

DATE 2/26/82

APPROVED BY

TITLE

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 03 1982

• See Instructions on Reverse Side

FARMINGTON DISTRICT

BY

NMOCC