

Submit 3 Copies to Appropriate District Office

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-28079

5. Indicate Type of Lease STATE [] FEE [X]

6. State Oil & Gas Lease No.

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 "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

Ora Jackson

1. Type of Well: OIL WELL [X] GAS WELL [] OTHER []

8. Well No. 2

2. Name of Operator O'Neill Properties, Ltd.

9. Pool name or Wildcat Scharb-Bone Springs

3. Address of Operator P.O. Box 2840 Midland, Texas 79702

4. Well Location Unit Letter N : 1840 Feet From The West Line and 800 Feet From The South Line

Section 5 Township 19S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3894 KB

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK [] PLUG AND ABANDON [] TEMPORARILY ABANDON [] CHANGE PLANS [] PULL OR ALTER CASING [] OTHER: []

REMEDIAL WORK [] ALTERING CASING [] COMMENCE DRILLING OPNS. [] PLUG AND ABANDONMENT [X] CASING TEST AND CEMENT JOB [] OTHER: []

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 3/9/92 Set 5-1/2" CIBP @ 9500 and cap w/35 sx class "H" cmt
3/10/92 Circ hole w/220 bbls. 9.5 mud
3/10/92 Spot 25 sx H cmt from 7730 to 7504
3/10/92 Spot 35 sx cmt from 4040 to 3774 (Tag plug @ 3784)
3/11/92 Spot 35 sx c cmt from 2070 to 1754
3/11/92 Cut and pull 5 1/2" csg from 1300'
3/11/92 Spot 45 sx C cmt from 1350 to 1180 (Tag plug @ 1163)
3/12/92 Perf @ 450 set pkr @ 3801 sqz w/55 sx C cmt
3/12/92 Spot 10 sx cmt from 30' to surface
3/13/92 Cut off wellhead and weld on 1/2" steel plate w/dry hole marker

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Louie French TITLE P&A Supervisor DATE 3/13/92

TYPE OR PRINT NAME Louie French TELEPHONE NO 915 563-2805

(This space for State Use)

APPROVED BY [Signature] TITLE DATE NOV 05 '92

CONDITIONS OF APPROVAL, IF ANY:

Handwritten initials and date