

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014

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.

5. Lease Serial No.
LC065421
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
Bradley-Federal #2

2. Name of Operator
O'Neill Properties, Ltd

9. API Well No.
30-015-00387

3a. Address
PO Box 2840, Midland, TX 79702

3b. Phone No. (include area code)
432-683-2771

10. Field and Pool, or Exploratory Area
Black River

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
P, 330 FSL, 330 FEL, 11 T-24-S R-26-W

11. County or Parish, State
Eddy, NM

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 checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompleate 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 recompleation 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.

12/18/13 MIRU plugging equipment. Dug out cellar. 12/19/13 ND wellhead, NU BOP. POH w/ 60 jts tbg. RIH w/ 61 jts tbg and tagged @ 1905'. Spotted 35 sx cement w/ 2 % CACL @ 1905'. Pull out of cement. WOC. Tagged plug @ 1754'. Circulated well w/ mud laden fluid. POH w/ tbg. 12/20/13 Tagged plug @ 1449'. POH w/ tbg. Perf'd csg @ 1075, 1050, 1025, & 1000. RIH w/ tbg to 1125' and pumped 100 sx cement w 2% CACL. POH w/ tbg and WOC. Tagged plug @ 618'. POH w/ tbg. Perf'd csg @ 500'. RIH to 550' of tbg and Spotted 100 sx cement. POH w/ tbg. WOC. 12/26/13 Tagged plug @ 40'. ND BOP. RIH w/ tbg to 40'. Spotted 40 sx tbg to surface. Riggged down moved off. 01/02/14 Moved in welder and backhoe. Dug out cellar. Cut off wellhead. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Removed deadmen. Cleaned location and moved off.

*Accepted for record
RD NMOCD 1/31/14*

*Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.*

RECEIVED
JAN 29 2014
NMOCD ARTESIA

RECLAMATION
DUE 6-24-14

ACCEPTED FOR RECORD
JAN 24 2014
[Signature]
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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

Title *Production Super in Tax Dept*
Date *1-6-2014*

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____
Office _____
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.

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.