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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

WELL API NO.
30-025-27046

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

6. State Oil & Gas Lease No. A-4096

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
Scharb 4

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

2. Name of Operator
Dallas Production, Inc.

8. Well No.
2

3. Address of Operator
4600 Greenville Ave. Dallas, Texas 75206-5038

9. Pool name or Wildcat
Scharb, Bone Springs

4. Well Location
Unit Letter F : 1980 Feet From The north Line and 1980 Feet From The west Line

Section 4 Township 19S Range 35E NMPM Lee County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3900' GR

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	[X]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			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.

Set 25 sk. cmt. plg. over perfs @ 9390'-9323'.
Freepoint 5 1/2" csg. (TOC 8100') Pull and lay down csg.
Set 100' plug,50' in and 50' out of 5 1/2" csg. stub. Tag plug.
Set 100' plug @ 6000'. Tag plug.
Set 100' plug, 50' in and 50' out of 8 5/8" shoe @ 4000'. Tag plug.
Set 100' plug @ 2000'. Tag plug.
Set 100' plug @ 500'. Tag plug.
Set 10 sk. plug in top. Tag plug.
Install dry hole marker.

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

SIGNATURE [signature] TITLE Regulatory Administrator DATE 5-29-96

TYPE OR PRINT NAME Alan Ashley TELEPHONE NO. 214-369-926

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 11 1996

CONDITIONS OF APPROVAL, IF ANY: