Appropriate District Office

Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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
30-025-28848

5. Indicate Type of Lease STATE ___ FEE XX

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
SCHARB 8

1. Type of Well:
OIL WELL XX GAS WELL ___ OTHER

2. Name of Operator
DALLAS PRODUCTION INC

8. Well No.
2

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

9. Pool name or Wildcat
Scharb; Bone Springs

4. Well Location
Unit Letter B : 660 Feet From The North Line and 2180 Feet From The East Line

Section 8 Township 19S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3852' 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	XX	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 sx plug 9640'. (perfs 9650-9768'). Tag plug.
Freepoint 5 1/2" csg. (TOC 6290'). Pull and lay down csg.
Set 100' plug, 50' in and 50' out of 5 1/2" csg. stub. Tag plug.
Set 100' plug, 50' in and 50' out of 8 5/8" shoe at 4000'. Tag plug.
Set 100' plug at 2000'.
Set 100' plug at 500'.
Set 10 sx plug in top.
Install plugged hole marker.

[illegible] NOTIFIED 24
[illegible] TO THE BEGINNING OF
[illegible] OPERATIONS FOR THE C-103
TO BE APPROVED.

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

SIGNATURE Alan Ashley TITLE Regulatory Adm. DATE 5-30-96

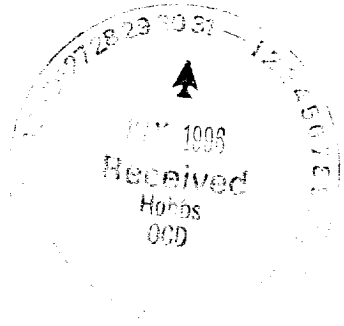
TYPE OR PRINT NAME Alan Ashley TELEPHONE NO. 214-369-9266

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE ___ DATE JUN 11 1996

CONDITIONS OF APPROVAL, IF ANY:

mp


1995
Received
Hobbs
OCD