

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

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.
NM 103591

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
GREEN WOOLEY BOOGER FED. '5' ;

9. API Well No.
30-015-31498

10. Field and Pool, or Exploratory Area
WILDCAT

11. County or Parish, State
**EDDY
NM**

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
DAVID H. ARRINGTON OIL & GAS, IN

3a. Address
P. O. BOX 2071, MIDLAND, TX 79702

3b. Phone No. (include area code)
(432)682-6685

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2,330' FSL, & 860' FWL, SEC. 5, T-19S, R-24E, NMPM

RECEIVED

AUG 19 2005

BOB-ANTERIM

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 type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other RE-ENTRY
	<input type="checkbox"/> Change Plans	<input 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 recompleat horizontally, give subsurface locations 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 recompleat 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.)

06-09-05

GO IN HOLE W/BIT, DRILL OUT 7' CMT. TAG @ 40'. DRILL OUT CMT. TO 350'.

06-10-05

TAG CMT. @ 350'. DRILL OUT TO 450'. RAN 10 JTS., TAG CMT. @ 1,112'. DRILL TO 1,310'.

06-11-05

DRILL CMT. TIH TO 3,000'.

06-12-05

DRILL OUT TO 3,760'. RAN 27 JTS., TAG CMT. DRILL OUT TO 4,730'.

06-13-05

DRILL CMT. FELL THRU @ 4,950'. RAN ALL TBG. IN HOLE TO 5,350'.

06-14-05

WASH OVER 5-1/2" CDG. TO 50'. RIH W/SPEAR, CAUGHT 5-1/2" CSG. 7' BELOW SURFACE. RD SU.

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

NANCY GETZ

Title

PROD. ANALYST

Signature

Date

08/18/2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

Title 18 U.S.C. Section 1001, makes 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.

(Instructions on reverse)