Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources NSERVATION DIVISION 220 South St. Francis Dr.		Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-015-34668
District II 1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			
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 Chartreuse Hose
1. Type of Well: Oil Well	Gas Well X Other	Month - Year	8. Well Number 1H
2. Name of Operator DAVID H. A	ARRINGTON OIL & GAS IN		9. OGRID Number 5898
3. Address of Operator PO BOX		C OCD - ARTESIA, NIM	10. Pool name or Wildcat Wildcat; Wolfcamp
4. Well Location			
Unit Letter O : 660 feet from the South line and 1880 feet from the East line			
Section 15	Township 18S	Range 23E	NMPM CountyEddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3894'			
Pit or Below-grade Tank Application or Closure Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil		·-	onstruction Material
12. 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	REMEDIAL WOR	_
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	T JOB
OTHER:Request Extension of expi			
13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
Our current permit will expire March 8, 2006. We respectfully request an extention of permit for 1 year.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-			
grade tank has been will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan [].			
SIGNATURE Weller	TITI	LE ENGINEER TECH	DATE 03/01/2007
Type or print name DEBBIE FREE	MANARRANT E-n	nail address:DEBBIE@A	RRINGTONOIL: COM hone No. (432)682-6685
Ear State Has Only	ICT II GEOLOGIST		MAR 0 5 2007
APPROVED BY:	TIT	LE	
Conditions of Approval (if any):			