Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103			
District I	Energy, Minerals and Natural Resources		Revised June 10, 2003			
1625 N. French Dr., Hobbs, NM 88240 District II				WELL API NO. 30 025 37554		
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type	of Lease	
District III	1220 South St. Francis Dr.			STATE X EEE 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				7. Lease Name of	or Unit Agreement Name	
(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.)				Ventimisto "34"		
1. Type of Well:				8. Well Number		
Oil Well / Gas Well / Other (Injection)				Well # 1		
2. Name of Operator				9. OGRID Number		
David H. Arrington Oil & Gas, Inc.				5868		
3. Address of Operator				10. Pool name or Wildcat Wildcat Morrow		
c/o P.O. Box 953, Midland, TX 79702 4. Well Location				Wildcat Monor	"	
4. Well Education						
Unit Letter A: 660 feet from the North line and 1244 feet from the East line						
Section 34 Township 18S Range 35E NMPM Lea County						
Section 10 lbs	11. Elevation (Show wheth					
entral district of the state of the same date.	į					
	ppropriate Box to Indi	cate N				
				SEQUENT RE	and the second s	
PERFORM REMEDIAL WORK	PLUG AND ABANDON [REMEDIAL WOR	RK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS [COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOB	ND		
OTHER:			OTHER: Drilling	status	X	
13. Describe proposed or comple	eted operations. (Clearly st	tate all p			tes, including estimated date	
of starting any proposed wor or recompletion.	k). SEE RULE 1103. For	Multipl	e Completions: A	ttach wellbore diag	proposed completion	
$\langle \phi \rangle$						
2-27-06: Moved on location & rigged up, drilled to depth of 20'.						
					(909A %)	
_	_			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
				/67	₹	
		١		No. 1		
I hereby certify that the information a	hove is true and complete	to the be	est of my knowled	ge and belief	or the first of the second of	
Thereby certaly that the highly and	The true and complete	io die oe	st of my knowled;	ge and ocher.		
SIGNATURE Manufield	TI TI	TLE_Re	egulatory Agent	DATE_2	-27-06_	
Type or print name Ann E. Ritchie	E-mail address: ar	nn.ritchi	e@wtor.net Te	lephone No. 432 68	34-6381	
(This space for State use)						
APPPROVED BY	TI	TLE			DATE	
Conditions of approval, if any. PETROLEUM ENGINEER						
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