

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103

May 27, 2004

WELL API NO.	30-025-36906
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name MIRACLE NYMPH 14 STATE	
8. Well Number	1
9. OGRID Number	5898
10. Pool name or Wildcat MIDWAY, BONE SPRING	

**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.)

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

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

3. Address of Operator P. O. BOX 2071  
MIDALND, TX 79702

4. Well Location  
Unit Letter M : 330 feet from the S line and 330 feet from the W line  
Section 14 Township 17S Range 36E NMPMN County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3,835' GR. LEVEL

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐ OTHER: ☒

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.

01-12-06 START ACID 20% HCL, W/CO2. PUMPED 235 BBLs. ACID, 392 BBLs. CO2.  
01-30-06 PERF. FROM 10,500' - 501', 6 SPF, .48" DIA. HOLE.  
01-31-06 SPOT 2 BBLs. 20% ACID. ACIDIZED W/1,500 GALS. 20% FERCHER ACID.  
02-08-06 PERF. 3 SPF, 10,440' - 41', 10,370' - 71', 10,313' - 14', 10,256' - 57', 10,170' - 17', 10,140' - 10,089'.  
02-09-06 ISOLATE PERFS. 10,440' - 41'. SPOT 1,000 GALS. 20% HCL ACID.  
02-10-06 ISOLATE PERFS. 10,370' - 71'. ACIDIZE W/1,000 GALS. 20% NEFE HCL.  
02-14-06 ISOLATE PERFS. 10,140'. ACIDIZE W/1,000 GALS. 20% NEFE ACID.

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 Nancy Getz TITLE PROD. ANALYST DATE 02/17/2006

Type or print name NANCY GETZ

For State Use Only

E-mail address:

Telephone No. (432) 682-6685

APPROVED BY: Larry Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE 02/17/2006

Conditions of Approval (if any):