Submit 3 Copies To Appropriate District Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 May 27, 2004 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	30-025-37554 5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name VENTIMISTO 34
1. Type of Well: Oil Well	Gas Well X Other	8. Well Number 1
2. Name of Operator David H. Arr	rington Oil & Gas, In	9. OGRID Number 5898
	071 TX 79702	10. Pool name or Wildcat WILDCAT MORROW
4. Well Location Unit Letter A : 660 feet from the N line and 1244 feet from the E line Section 34 Township 18S Range 35E NMPM CountyLEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3881' GR 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 CHANGE PLANS COMMENCE DRILLING OPNS P AND A CASING/CEMENT JOB CASING/CEMENT JOB P AND A CASING/CEMENT JOB TIME 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. 4/22/06: RU & DRILL TO 26'.		
		12 23 24 26 18 18 18 18 18 18 18 18 18 18 18 18 18
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 (NOTO)	THE Agent	DATE 04/24/2006
Type or print name Debbie Freeman For State Use Only	E-mail address:debbie@arrii	ngtonoil.com Telephone No. (432)682-6685 APR 2 8 2006
APPROVED BY: Conditions of Approval (if any):	W.W. TITLE OF PIECO REPRESENTATIVE	Telephone No. (432)682-6685 APR 2 8 2006 DATE DATE