

Submit 3 Copies To Appropriate District Office
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

Form C-103
Revised March 25, 1999

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

WELL API NO. 30-025-35369
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 27147
7. Lease Name or Unit Agreement Name: Bill's Hopper
7. Well No. 1
8. Pool name or Wildcat Wildcat Atoka

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator David H. Arrington Oil & Gas, Inc	
3. Address of Operator P.O. Box 2071, Midland, Texas 79703	
4. Well Location Unit Letter <u>O</u> : <u>660'</u> feet from the <u>South</u> line and <u>660'</u> feet from the <u>East</u> line Section <u>18</u> Township <u>15S</u> Range <u>35E</u> NMPM Lea County	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4031'	

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Plug Back to Atoka <input checked="" type="checkbox"/>

12. 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.

9/9/02 Set 5 1/2" CIBP @ 12,820' plus 35' cmt.
9/10/02 Perf Atoka 12,654' - 665', 12,580' - 594' Test
10/21/02 Set composite 5 1/2" BP @ 12,500'.
10/24/02 Perf Atoka 12,396' - 12,413' Test
10/25/02 Acidize 12,396' - 12,413' w/ 2500 gals Clay Safe H w/ 1000 scf/bbl N2
Flow test until 12/02/02.
Submit new well recompletion report on 12/03/02

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Chuck Sledge TITLE Engineer DATE 12/02/02

Type or print name Chuck Sledge
(This space for State use)

Telephone No. (915) 682-6685

APPROVED BY PAUL F. KAUTZ TITLE PETROLEUM ENGINEER DATE DEC 30 2002
Conditions of approval, if any:

20 W Edison Morrison