

N. M. OIL CONS. COMMISSION
P. O. BOX 1900
HOBBS, NEW MEXICO 8824

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-031621-B
2. Name of Operator DAVID H. ARRINGTON OIL & GAS, INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. BOX 2071, MIDLAND, TEXAS 79702	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL & 330' FWL, SEC. 10, T-20-S, R-37-E	8. Well Name and No. BRITT PHILLIPS NO. 2
	9. API Well No.
	10. Field and Pool, or Exploratory Area EUMONT OIL POOL
	11. County or Parish, State LEA

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other CORRECT WELL NAME	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

ORIGINAL FORMS WERE FILED WITH BRITT B-18 IN NO. 7. THIS WAS PICKED UP BY THE STATE OF NEW MEXICO O.C.D. AS THE LEASE NAME. THE CORRECT LEASE NAME IS THE BRITT PHILLIPS.

See

5 1993



14. I hereby certify that the foregoing is true and correct

Signed *Steve J. Anderson* Title OFFICE MANAGER Date 03/24/93

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side