Submit I Copy To Appropriate District	State of New M	exico 9-5-20	19-Emailed	Form C-103
Submit I Copy To Appropriate District Office District - (575) 393-6161 State of New Mexico State of New Mexico Office District - (575) 393-6161 State of New Mexico Well API NO. Well API NO.				
6295 N. Lettendh Dr., Profess, AM 883240				
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-207	
<u>District III</u> - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE 🔯	
District IV - (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505	HOBBS OCD		15603	
SUNDRY NOT	ICES AND KEPOK IS ON WELL	3 -	7. Lease Name or Un	it Agreement Name
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO DEEPEN OR PI CATION FOR PERMIT" (FORM C-101) I	CHG BACK TO A	LOWE	
PROPOSALS.)			8. Well Number	
1. Type of Well: Oil Well	Gas Well Other	ECEIVED	9. OGRID Number	
2. Name of Operator Purvis Operating Co.	•		131559	
3. Address of Operator			10. Pool name or Wildcat	
PO Box 51990, Midland, TX 79710-1990			Gladiola Wolfcamp	
4. Well Location				
Unit Letter A: 554 feet from the North line and 554 feet from the East line				
Section 34 Township 12S Range 37E NMPM Lea County				
	11. Elevation (Show whether Di	R, RKB, RT, GR, etc.)		
	3901			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data				
NOTICE OF IN			SEQUENT REPO	
PERFORM REMEDIAL WORK	PLUG AND ABANDON CHANGE BLANG	REMEDIAL WORK	= :	TERING CASING
TEMPORARILY ABANDON UPON PULL OR ALTER CASING	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRII	<u>=</u>	ND A
DOWNHOLE COMMINGLE	MOLTIFEE COMPL (CASING/CEMENT	100b Li	
CLOSED-LOOP SYSTEM		Well 1	has been P&A'd	
OTHER:				OCD Inspection
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellhore diagram of All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.				
All pits have been remediated in compliance with	OCD rules and the terms of the Operator's pit pen	mit and closure plan.	iibictions. Attain wein	ore diagram of
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR				
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.				
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed				
from lease and well location. All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.) All other environmental concerns have been addressed as per OCD rules.				
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.				
If this is a one-well lease or last remaining well or location, except for utility's distribution infrastructure.	n lease: all electrical service poles and lines have b	een removed from lease and we	an	
location, except for unity's distribution infrastructure.				
Spud Date:	Rig Release D	ate:		
L				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE JOHNING	DOWN THILE P	etroleum Engin	eerDATE	9/4/2019
/~		0		. 400 600 5046
Type or print name <u>Donnie E. Brown</u> E-mail address: <u>eng@purvisop.com</u> PHONE: <u>432-682-7346</u> For State Use Only				
APPROVED BY: XIM 3	orter TITLE C.	<i>U. H</i>	DATE	9-24-19
Conditions of Approval (if apy):				