

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
 May 27, 2004

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

WELL API NO. 30-025-38037 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-6559 & VB-0563-1
7. Lease Name or Unit Agreement Name Coyote St. Com #1 ✓
8. Well Number
9. OGRID Number 131559 ✓
10. Pool name or Wildcat WILDCAT/MORTON MISS. ✓

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
Purvis Operating Co.

3. Address of Operator
P O Box 51990 Midland, TX 79710-1990

4. Well Location
 Unit Letter D : 990 feet from the NORTH line and 1316 feet from the WEST line
 Section 8 Township 15S Range 35E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4029' GR

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater 60' Distance from nearest fresh water well 4 miles Distance from nearest surface water _____ miles & _____ miles

Pit Liner Thickness: 12 miles 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:		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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: DRILLING <input type="checkbox"/>	

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.

1/26/08 - DRILLED 2' - TD = 41'

RECEIVED

FEB - 4 2008

HOBBS OCD



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 [Signature] TITLE LAND MANAGER DATE 1/29/08

Type or print name D. BRIGGS DONALDSON E-mail address: land@purvisop.com Telephone No. 432-682-7346
 For State Use Only

APPROVED BY: [Signature] OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE MAR 06 2008

Conditions of Approval (if any):

