

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 MBE

6. State Oil & Gas Lease No.
 V-6559 & VB-0563-1

7. Lease Name or Unit Agreement Name
 Coyote SL. 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: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <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.

8/19/07 - DRILLED 2' - TD = 25' - FAX SYLVIA DICKEY - 505-393-0720

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 OGD-approved plan .

SIGNATURE [Signature] TITLE LAND MANAGER DATE 3/21/07

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] FIELD REPRESENTATIVE II/STAFF MANAGER
 TITLE _____ DATE AUG 21 2007