

FEB - 2 2009

Form C-103

June 19, 2008

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-015-36391

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

V0-6852 & V0-6857

7. Lease Name or Unit Agreement Name

SEGREST STATE COM

8. Well Number

1

9. OGRID Number

131559

10. Pool name or Wildcat

WILDCAT LITTLE BOX CANYON

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 G : 1750 feet from the NORTH line and 1400 feet from the EAST lineSection 2 Township 21S Range 21E NMPM EDDY County NM

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

4549GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐

OTHER:

☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPS ☒ P AND A ☐CASING/CEMENT JOB ☐

OTHER:

☐

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.

1/16/09 - DRILLED 2' - TD = 22'.

Spud Date:

Rig Release Date:

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

SIGNATURE



TITLE LAND MANAGER

DATE 1/26/09

Type or print name D. BRIGGS DONALDSON E-mail address: land@purvisop.com PHONE: 432-682-7346
For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

Accepted for reco.
NMOCD