		CED 9 & 2000	6
Submit 3 Copies To Appropriate District Office	State of New Mexico lergy, Minerals and Natural Resources	SEP 3 0 2009	Form C-103 /W May 27, 2004
District I 1625 N. French Dr , Hobbs, NM 8824	IET	WELL API NO.	
1625 N. French Dr., Hobbs, NM 8870 CIL CONSERVATION DIVISION District III 1301 W. Grand Ave., Artesia, NM 88210 District III CED. 2.9. 20061220 South St. Frencis Dr.		30-015-36344 5. Indicate Type of Lease	
2500 P. P. P. A. West Sep 2 6 (1) 91 220 South St. Francis Dr.		STATE STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NMOBBSOCD Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
87505		VA-2923	
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.)		7. Lease Name or Unit Agre	ement Name
		BUZZARD CANYON	STATE
1. Type of Well: Oil Well Gas Well Other		8. Well Number 1	
2. Name of Operator PURVIS OPERATING CO.		9. OGRID Number 131559	
3. Address of Operator		10. Pool name or Wildcat	
P.O. BOX 51990, MIDLAND, TX 79710-1990		WILDCAT	
4. Well Location			
	0 feet from the SOUTH line and 1		S'I' line
Section 16	Township 20S Range 21E evation (Show whether DR, RKB, RT, GR, etc.	NMPM EDDY County	
	GR 4560		
Pit or Below-grade Tank Application or Closure			
	Distance from nearest fresh water well_ <u>1000</u> Dist w-Grade Tank: Volume 4800 bbls; Co	ance from nearest surface water <u>1</u> onstruction Material	000+
	riate Box to Indicate Nature of Notice,		
		-	
NOTICE OF INTENTI PERFORM REMEDIAL WORK ☐ PLUG	l l	SEQUENT REPORT O	F: GCASING 🗌
	AND ABANDON REMEDIAL WOR GE PLANS COMMENCE DRI		
	IPLE COMPL CASING/CEMEN	21	_
OTHER:	□ OTHER:	1	П
13. Describe proposed or completed ope	erations. (Clearly state all pertinent details, and		
of starting any proposed work). SEI or recompletion.	E RULE 1103. For Multiple Completions: At	tach wellbore diagram of propo	osed completion
of recompletion.			
9/13/09 - DRILLED	2! - TD - 50!		
3/ 13/ 03 - DRIBLED	2 - 1D = 30 · .		
			•
I hereby certify that the information above is	true and complete to the best of my knowledge	e and belief. I further certify that	any nit or below-
	ording to NMOCD guidelines [], a general permit []		
SIGNATURE 5.3 JA	TITLE LAND MANAGER	DATE 9	/22/09
D. BRIGGS DONALDS	ON		
Type or print name For State Use Only	E-mail address:land@pur	visop.com Telephone No). 432 - 682-73
	$>$ \cap ,		(-1 -
APPROVED BY: /am> Conditions of Approval (if any)	TITLE SOLANS	DATE	0/5/07
Conditions of Approval (if any);	U		

LEASE BUZZARD WELL STATE FF TD 50 H Casing Perf-or-OH Pay _____ Tubing In _ Tubing Out ... Rods Out ___ _ Rods In _ Subs In Subs Out -Pump In _ Pump Out -DESCRIPTION OF WORK Signed Dennis Tidwell ☐ Check If Additional On Back

Bryan Printers & Stationers, Inc. Form No. 753

WELL SERVICE REPORT