Submit 3 Copies To Appropriate District	Otan - (N) NA-		Form C-103	
Office	State of New Mexico Energy, Minerals and Natural Resources		May 27, 2004	
District I 1625 N. French Dr., Hobbs, NM 88240	energy, witherars and Natu		API NO.	
District II	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		25-38037	
1301 W. Grand Ave., Artesia, NM 88210 District III			licate Type of Lease	
1000 Rio Brazos Rd., Aztee, NM 87410			STATE M FEE	
District IV Santa Fe, NM Santa Fe, NM			6559 & VB-0563-1	
SUNDRY NOTICES AND REPORTS ON WELLS			ase Name or Unit Agreement Name	
(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.		UG BACK TO A		
		<u></u>	yote St. Com #1	
1. Type of Well: Oil Well Gas Well Other		8. W	ell Number	
2. Name of Operator		9. OC	9. OGRID Number	
Purvis Operating Co.			131550 10. Pool name or Wildeat	
3. Address of Operator	P O Box 51990 Midland, TX 79710-1990			
4. Well Location	Midland, TX 79710-1990		WILDCAT/MORTON MISS.	
Unit Letter D :	990 feet from the NORTH	line and 1316	feet from the WEST line	
Section 8	Township 158 R			
11. Elevation (Show whether DR, RKB, RT, GR, ctc.) 4029 GR				
Pit or Below-grade Tank Application of		4 miles	m nearest surface wateriles & miles	
Pit type Depth to Groundw	After Distance from nearest fresh A			
Pit Liner Thickness: 12 milesmit		bbls; Construction		
12. Check	Appropriate Box to Indicate N	lature of Notice, Repor	t or Other Data	
NOTICE OF IN	ITENTION TO:	SUBSEQU	JENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WORK	☐ ALTERING CASING ☐	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	_	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JOB	U	
OTHER:		OTHER: DRILLING		
13. Describe proposed or comp	pleted operations. (Clearly state all	pertinent details, and give p	portinent dates, including estimated date	
of starting any proposed wo	ork). SEE RULE 1103. For Multip	ile Completions: Attach wo	ellbore diagram of proposed completion	
or recompletion.				
	24 321			
4/21/07 - DRILI	LED $2' - TD = 13' - 1$	FAX TO SYLVIA DI	ICKEY - 505-393-0720	
			21. C. 1. C. at any official and the second	
I hereby certify that the information grade tank has been/will be constructed o	above is true and complete to the triclosed according to NMOCD guidelines	Dest of my knowledge and books, a general permit or an (a)	clicf. I further certify that any pit or below-ttached) alternative OCD-approved plan	
SIGNATURE SIGNATURE	TITLE_	LAND MANAGER	DATE 4/23/07	
Type or print name D. BRIGG				
	5 DONALDSON , E-mail a	ddress:land@purvisc	op.comTelephone No.432-682-734	
For State Use Only		_	*ADD 3 () 200	
APPROVED BY:		ddress:land@purvisc	*ADD 3 () 200	