Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N French Di , Hobbs, NM 88240 District II			WELL API NO. 30-025-38036
1301 W Grand Ave , Artesia, NM 88210	esia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
District IV	Santa Fe, NM 8/303		6. State Oil & Gas Lease No.
1220 S St Francis Dr, Santa Fe, NM 87505	Santa Fe, NM		V0-6717
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease 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)			BADGER STATE
1. Type of Well: Oil Well Gas Well V Other			8. Well Number 1
2. Name of Operator			9. OGRID Number
PURVIS OPERATING CO.			131559 MISSISSIPPLAN
3. Address of Operator			10. Pool name or Wildcat
P.O. BOX 51990, MIDLAND, TX 79710			MORTON MISSISSIPPIAN
4. Well Location			
Unit Letter P: 660 feet from the SOUTH line and 660 feet from the EAST line Section 6 Township 15S Range 35E NMPM LEA County			
Section 6		nge 35E	NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4037 GR Pit or Below-grade Tank Application or Closure			
		enter well Dist	tance from nearest surface water
Pit type Depth to Groundwa	,		
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	_
TEMPORARILY ABANDON PULL OR ALTER CASING	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRI	
PULL OR ALTER CASING []	MOLTIPLE COMPL	CASING/CEMEN	I JOB
OTHER:	X	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.			
			THE THE STATE OF T
2/15/08 - DRILLED	2' - TD = 17'		EED o o sano
			FEB 22 2008
			LIADDO AAA
			HOBBS OCD
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I hereby certify that the information s	hove is true and complete to the be	act of my knowledge	se and helief I further certify that any nit or helow

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 \square , a general permit \square or an (attached) alternative OCD-approved plan \square . LAND MANAGER DATE 2/15/08 432-682-7346 Telephone No. D. BRIGGS DONALDSON
Type or print name
For State Use Only land@purvisop.com E-mail address: TITLE DISTRICT SUPERVISOR/GENERAL MARAGEMAR 0 6 2008 APPROVED BY:

Conditions of Approval (if any):