| Submit 3 Copies To Appropriate District Office                                  | State of Nev                                    |   | Form C-103                                |                      |  |  |
|---|---|---|---|----------------------|--|--|
| District I<br>1625 N French Dr , Hobbs, NM 88240                                | Energy, Minerals and                            | Natural Resources                       | WELL API NO.                              |                      |  |  |
| District II 1301 W Grand Ave, Artesia, NM 88210 District III                    | OIL CONSERVAT                                   |   | 30-025-38037  5. Indicate Type of Lease   |                      |  |  |
| 1000 Rio Brazos Rd , Aztec, NM 87410  | Santa Fe, N                                     |   | STATE X FEE  6. State Oil & Gas Lease No. |                      |  |  |
| District IV<br>1220 S. St Francis Dr., Santa Fe, NM<br>87505                    | Sunta 1 0, 11                                   | 111 073 03                              | V-6559 & VB-0563-1                        |                      |  |  |
|   | TICES AND REPORTS ON W                          | 7. Lease Name or Unit A                 | greement Name                             |                      |  |  |
| DIFFERENT RESERVOIR USE "APPL<br>PROPOSALS.)                                    |   | Coyote St. Cor                          | m #1 /                                    |                      |  |  |
| 1. Type of Well: Oil Well   | Gas Well 🔲 Other                                | 8. Well Number                          |   |                      |  |  |
| 2. Name of Operator Purvis Operating  | co /  |   | 9. OGRID Number /                         |                      |  |  |
| 3. Address of Operator  | <u> </u>  | 10. Pool name or Wildcat                |   |                      |  |  |
| P O Box 51990   | Midland, TX 79710                               | -1990                                   | WILDCAT/MORTON MISS.                      |                      |  |  |
| 4. Well Location Unit Letter D  | · 990 feet from the NC                          | DMH 1: and 1                            | .316 feet from the V                      | WEST line            |  |  |
|   |   |   |   |                      |  |  |
| Section 8   | Township 15 11. Elevation (Show whether 4029 GR | S Range 35E<br>er DR. RKB, RT, GR, etc. |   | Y LEA                |  |  |
| Die Die der Talen ist der   |   |   |   |                      |  |  |
| Pit or Below-grade Tank Application ☐  Pit type Depth to Ground                 |   | fresh water well 4 mile                 | tance from nearest surface water          | niles & miles        |  |  |
| Pit Liner Thickness: 12 milesmi   |   |   | onstruction Material                      |                      |  |  |
|   | Appropriate Box to Indic                        |   |   |                      |  |  |
|   | • •   |   | _   |                      |  |  |
| NOTICE OF I   | NTENTION TO:<br>] PLUG AND ABANDON [            |   | SEQUENT REPORT                            | OF:<br>RING CASING □ |  |  |
| TEMPORARILY ABANDON   | ]   | COMMENCE DR                             | ···                                       |                      |  |  |
| PULL OR ALTER CASING  |   | ] CASING/CEMEN                          | _   |                      |  |  |
| OTHER.  | r   | OTHER: DRI                              | LLING                                     |                      |  |  |
| OTHER:  13. Describe proposed or com  | <br>upleted operations. (Clearly sta            | J JOHNER.                               |   | ding estimated date  |  |  |
| of starting any proposed v  | vork). SEE RULE 1103. For M                     |   |   |                      |  |  |
| or recompletion.  |   |   |   |                      |  |  |
| 0.45.400  |   |   |   |                      |  |  |
| 3/6/08 - DRI  | ILLED 2' - TD = 45                              | <b>5 '</b>                              |   |                      |  |  |
|   |   |   |   |                      |  |  |
|   |   |   | BEREN                                     |                      |  |  |
|   |   |   | recei                                     | VEL                  |  |  |
|   |   |   | MAR 172                                   | enen.                |  |  |
|   |   |   |   |                      |  |  |
|   |   |   | HUBBS                                     | OCD                  |  |  |
|   |   |   |   |                      |  |  |
|   |   |   |   |                      |  |  |
|   |   |   |   |                      |  |  |
| I hereby certify that the informatio grade tank has been/will be constructed of |   |   |   |                      |  |  |
| Chi.  | 74  |   |   |                      |  |  |
| SIGNATURE   | TIT   | LE LAND MANAG                           | <u>ER</u> DATE                            | 3/10/08              |  |  |
| Type or print name D. BRIGG   | S DONALDSON E-r                                 | nail address:land@pu                    | rvisop.com <sup>Telephone</sup>           | No.432-682-7346      |  |  |
| For State Use Only  |   | <i>A</i>                                | V 3                                       | PR 1 1 2008          |  |  |
| APPROVED BY:  | TIT   | ie <i>Geologist</i>                     | DATE                                      |                      |  |  |
| Conditions of Approval (if any):  | -   | •                                       |   |                      |  |  |

bøde

Mr11 219 ASE: 80 8005, TO AAM

80-Lang (0CD 2: |141),

LING CONTRACTORS BOX 637

## ABBOTT BROTHERS

HOLE SERVICE PHONES - (575) 393-8228 or (800) 781-8228 BOX 305 VAID: 1923 WEST BENDER

YARD: 1923 WEST BENDER HOBBS, NEW MEXICO 88240 DATE 3-6-08

| D WORK TICKET  WHANY Duruis |          | Lease _                                | Coy    | vte St C         | on | <u>ں</u> w | ELL            |          |
|-----------------------------|----------|--|--------|------------------|----|------------|----------------|----------|
| ORESS                       |          |  |        |                  |    |            |                |          |
| EQUIPMENT USED              |          | AC                                     | TIVITY |                  |    | HOURS      | RATE OF<br>PAY | SUBTOTAL |
| i NO.                       | Roaa     | hear                                   | to le  | cation           |    |            |                |          |
|                             | de       | iii ¥                                  | rom    | Kation<br>43'-45 | 1  | 3          | 32500          | 907500   |
|                             |          | Ü                                      |        |                  |    |            |                |          |
| SC. REMARKS:                |          |  |        | Nowfo            |    | ,          |                |          |
|                             |          |  |        | P                |    |            |                |          |
|                             |          |  |        | ·····            |    |            |                |          |
|                             |          | ······································ |        |                  |    |            |                |          |
|                             |          |  |        |                  |    |            | TOTAL          | 97500    |
| Thuben Genzale              | <b>4</b> |  | AC     | CEPTED           |    |            |                |          |
| PIICHER                     | <i>-</i> | COMPANY REPRESENTATIVE                 |        |                  |    |            |                |          |

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