Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr. Hobbs, NM 88240	Energy, Minerals and Natu	WELL API NO. 30-025-38036		
District II	OIL COMORDIA TION DIVICION			
1301 W. Grand Ave , Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	_
1000 Rio Biazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE X FEE [6. State Oil & Gas Lease No.	
1220 S St Francis Di , Santa Fe, NM			V0-6717	
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreeme	nt 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 PURVIS OPERATING CO.			9. OGRID Number 131559 1119/215813911AN	
3. Address of Operator			10. Pool name or Wildcat	
P.O. BOX 51990, MIDLAND, TX 79710			MORTON MISSISSI	PPIAN
4. Well Location				
Unit Letter P :	660 feet from the SOUT			line
Section 6	Township 15S Ra		NMPM LEA County	- List College
	11. Elevation (Show whether DR) 4037 GR	, RKB, RT, GR, etc	)	
Pit or Below-grade Tank Application or		watan wall Dia	tance from nearest surface water	
Pit type Depth to Groundwat			tance from nearest surface wateronstruction Material	-
Pit Liner Thickness: mil	Below-Grade Tank: Volume			
12. Check A	ppropriate Box to Indicate N	ature of Notice,	Report or Other Data	
NOTICE OF INT	FENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK				√SING 🗌
TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRIL				
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	T JOB	
OTHER:	[2]	OTHER:		
			d give pertinent dates, including est	
	k). SEE RULE 1103. For Multip	le Completions: At	tach wellbore diagram of proposed	completion
or recompletion.				
		· ***	Approximation and the second	
7/4/08 - DRILLED 2	2! - TD = 31!	1	<b>ECEMEN</b>	
// 4/ 00 BRIDDS =	, 35 02	1-		
			All I donne	
		-		
I hereby certify that the information a	bove is true and complete to the h	est of my knowledg	e and belief. I further certify that any	nit or below-
grade tank has been/will be constructed or c	losed according to NMOCD guidelines [	, a general permit	or an (attached) alternative OCD-approv	ved plan .
	M	LAND MANAG	77	9/08
SIGNATURE	TITLE		DATE	
D. BRIGGS DC Type or print name	NALDSON E-mail ac	land@purv	isop.com Telephone No. 4	32-682-734
For State Use Only	2 // 1		receptione 1.0.	

Chie Welliams PC DESTRICT SUPERVISOR/GENERAL MANAGER DATE

APPROVED BY: Min. Conditions of Approval (if any):

JUL 75 2008