Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.
30-037-20052

5. Indicate Type of Lease
   STATE ☐   FEE ☑

6. State Oil & Gas Lease No.

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 Agreement Name:
   ANNA KATHERYN

1. Type of Well:
   Oil Well ☐   Gas Well ☑ Other

2. Name of Operator
   GKG ENERGY

8. Well No.
   2

3. Address of Operator
   PO BOX 1065 TUCUMCARI, NM

9. Pool name or Wildcat

4. Well Location

   Unit Letter I : 660' feet from the NORTH line and 600' feet from the WEST line

   Section 30   Township 10N Range 27E   NMPM QUAY County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
    4433' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPLETION ☐	CASING TEST AND CEMENT JOB ☑	
OTHER: ☐		OTHER: PERFORATE & ACIDIZE ☑	

12. 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 recompilation.

01-03-03

RIG UP PERFORATERS & PERF FROM 6998' TO 7052' - 27' TOTAL - TIH W/PKR SPOT 2 BBLS ACD OVER PERFS SET PKR @ 6902' & ACIDIZE W/2500 GALS 7.5% HCL, AVG TREATING PSI 1550# @ 5 BPM - ISIP 640# - 15 MIN 597# - SWAB WELL DRY IN 4 RUNS - OUSI 0" PSI - PREP TO MOVE UP HOLE

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE   TITLE AGENT   DATE 04-02-03

Type or print name MIKE VODELL   Telephone No.

(This space for State use)

APPROVED BY   TITLE DISTRICT SUPERVISOR DATE 4/4/03
Conditions of approval, if any: