

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-33021
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-1221
7. Lease Name or Unit Agreement Name GECKO -27- State
8. Well No. 1
9. Pool name or Wildcat Wildcat
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3712' GL

**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.)

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

2. Name of Operator  
GECKO, Inc.

3. Address of Operator  
310 W. Wall, Suite 702 -LB106, Midland, TX 79701

4. Well Location  
Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line  
Section 27 Township 15 S Range 38 E NMPM Lea County

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

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.

P&A Well as follows:

PLUG	INTERVAL	FOOTAGE	SX CEMENT
1	11,282 - 11,182'	100'	30
2	9,280 - 9,110'	170'	30
3	7,495 - 7,395'	100'	30
4	4,955 - 4,855'	100'	35
5	1,100 - 1,000'	100'	35
6	Surface		10

Cut off wellhead. Welded on dry-hole marker.  
Well P&A 08/22/95

Approved as to plugging of the Well Bore.  
Liability under head is retained until  
surface restoration is completed.

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

SIGNATURE Steve L. Thomson TITLE President DATE 08-25-95

TYPE OR PRINT NAME Steve L. Thomson TELEPHONE NO. (915) 686-0121

(This space for State Use)

APPROVED BY GARY W. WINK TITLE OCC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JAN 23 2003

CONDITIONS OF APPROVAL, IF ANY:

15-116