

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-34681
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator GECKO		6. State Oil & Gas Lease No. A-1320
3. Address of Operator 3100 N. -A- Street, Suite 118, Midland, Texas 79705-6104		7. Lease Name or Unit Agreement Name: New Mexico -EQ- State
4. Well Location Unit Letter <u>A</u> : <u>990</u> ' feet from the <u>N</u> line and <u>990</u> ' feet from the <u>E</u> line Section <u>16</u> Township <u>16S</u> Range <u>35E</u> NMPM Lea County		8. Well No. <u>2</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4004' GR		9. Pool name or Wildcat Townsend Morrow (Gas)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Recomplete Well from Strawn to Morrow <input checked="" 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Perforated Morrow from 12,008' - 12,418' KB.  
Swab down and flow test well.  
Acidized well with 1000 gallons of 7-1/2 % NE-FE HCl acid w/ 105 MCF Nitrogen.  
Swab down and flow test well.  
Last test 100 MCFGPD.

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 03/23/2000

Type or print name Steve L. Thomson Telephone No. 915-686-0121  
(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 2 2000  
Conditions of approval, if any:

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Received  
Hobbs  
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