Submit 2 Lopies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

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

OIL CONSERVATION DIVISION

	F	(ev ised	11-1-4

P.O. BOX 1980, PRODUK, NIM 882AU	2040 Pacheco	St.	30 035 34C01
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, N	M 87505	30-025-34681 5. indicate Type of Lease
DISTRICT III			STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. A-1320
SUNDRY NOTIC	ES AND REPORTS ON WE	LLS	
(DO NOT USE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
	/OIR. USE "APPLICATION FOR PE 01) FOR SUCH PROPOSALS.)	RMIT*	See Falls of Olik Agreement Name
1. Type of Well: OIL GAS			New Mexico -EQ- State
MEIT X MEIT	OTHER		
2. Name of Operator GECKO			8. Well No.
3. Address of Operator			9. Pool name or Wildcat
3100 NA- Stree	et, #118 Midland,	TX 79705	North Shoe Bar Devoniar
4. Well Location			
Unit Letter A : 990	Feet From TheN	Line and 99	0 Feet From The E
Section 16	Township 16S R	inge 35E j	NMPM Lea County
	10. Elevation (Show whether	DF, RKB. RT, GR, etc.)	V/////////////////////////////////////
	4004' GR		
	ppropriate Box to Indicate		-
NOTICE OF INTE	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. X PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB X
OTHER:		OTHER:	
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	100s (Clearly state all pertinent details, at	nd give pertinent dates, includ	ling estimated date of starting any proposed
09/01/99 Spud well		16.	
Drilled surface hol			:50 and Glass G samest
Ran 11 jts 13-3/8" Circulated 130 sxs		ed same with s	550 sxs Class -C- cement.
Tested casing to 50	-		
Drilled intermediat	e hole to4894'.		
		ed same with 1	1875 sxs Class -C- cement
Circulated 13 sxs t			
Tested casing to 75	ou psig. Hera Ok.		
NOTE: Change drill	ling contractor fro	om FWA Peterso	on to Patterson.
-			
I hereby certify that the information above is true a	nd complete to the best of my knowledge and	belief.	
SIGNATURE Succession	т	u President	
TYPE OR PRINT NAME Steve L. Th	nomson		915 TELEPHONE NO. 686012
			1022 TEATE NO. 000012
(Thus space for State Use) ORIGINAL S	ICADA DA CARIS WILLIAMS ROM ESCASOP		•
		1 E	
APPROVED BY	m	<u>ш</u> ————	DATE