

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

Form C-103
May 27, 2004

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

WELL API NO. 30-025-01037
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name STATE C AC 1
8. Well Number 4
9. OGRID Number 20165
10. Pool name or Wildcat SWD Devonian

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: SWD

2. Name of Operator
SAMSON RESOURCES COMPANY

3. Address of Operator
200 N. Loraine St., Ste 1010; Midland, TX 79701

4. Well Location
Unit Letter M : 660 feet from the South line and 660 feet from the West line
Section 2 Township 12S Range 33E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4237' GR

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING MULTIPLE COMPL

OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. P AND A
CASING/CEMENT JOB

OTHER: Bradenhead Test

13. 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 recompletion.

2/2/2007 - 2/23/2007:

MIRU PU. ND WH. NU BOP. Rlse pkr. Send pkr assembly for inspection.
POH w/tbg. Test tbg. RIH w/pkr.
ND BOP PU. WH Flange. Test pkr NU WH. RDMO PU.
Run regulatory test. Test good. Chart attached.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Krawietz TITLE District Engineer DATE: 03/13/2007

Type or print name Ken Krawietz E-mail address: kkrawietz@samson.com Telephone No. 432-683-7063

For State Use Only

APPROVED BY: Harry W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE _____

Conditions of Approval (if any)

MAR 29 2007

