Submit 5 Copies Appropriate Distaint Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240		of New Mexico Natural Resources Departme.	Form C-104 Revised 1-1-89 See Instructions
DISTRICT II P.O. Drawer DD, Anenia, NM 8821		VATION DIVISION	at Bottom of Pag
DISTRICT III	Santa Fe, Nev	w Mexico 87504-2088	
1000 Rio Brazos Rd., Aziec, NM 87	REQUEST FOR ALLON	WABLE AND AUTHORIZA OIL AND NATURAL GAS	
Operator SAMSON RESOUR		OL AND NATURAL GAS	Well API No.
Address	• •	100	30-025-21889
Reason(s) for Filmg (Check proper L		103 Other (Please explain)	
New Well	Change in Transporter of		
Recompletion Change in Operator <u>KX</u>	Oil 🔤 Dry Gas Caninghead Gas 🔄 Condensate	 Effective 3-1-93	
f change of operator give name nd address of previous operator	Geodyne Operating Comp		
I. DESCRIPTION OF WE		ung 920 Bouch Bost	on Tulsa, OK 74103-3708
Lease Name	Well No. Pool Name, in	cluding Formation	Kind of Lease Lease No
Bagley State	l Bagley	Permo Penn, North	State, Federal or Fee K 2604
Unit Letter H	660 Feet From The	East Line and198	0 Feet From The North
Section 16 Tow	roship 11S Range 33	Е, МР М,	Lea County
I. DESIGNATION OF TR iame of Authonzed Transporter of C	ANSPORTER OF OIL AND NA	TURAL GAS	approved copy of this form is to be sent
Amoco Pipeline		520 NW Avenue L	eveland, TX 79336
ame of Authonized Transporter of C Watten Petrole		Address (Give address to which a	approved copy of this form is to be sent;
well produces oil or liquids,		P.O. Box 1589 Tr lge. is gas actually connected?	ulsa, OK 74101
	Н 16 115 33	E Yes	1-67
COMPLETION DATA	that from any other lesses or pool, give comm		
Designate Type of Complete	on - (X)	<u> </u>	Deepen Plug Back Same Resiv Diff Resiv
ale Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
evalues (DF. RKB. RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
rformions			Depth Casing Shoe
	TUBING, CASING AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	······································		
TEST DATA AND REQU			
te First New Oil Run To Tank	tr recovery of total volume of load oil and m Date of Test	ist be equal to or exceed top elloweble Producing Method (Flow, pump, g	e for this depth or be for full 24 hours.) as lift, etc.)
ngth of Test	Tubing Pressure	Casing Pressure	Choke Size
sual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF
AS WELL			·····
tual Prod. Test - MCF/D	Leagth of Test	Bbis. Condenante/MMCF	Gravity of Condensate
ting Method (puot, back pr)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
OPERATOR CERTIFI	CATE OF COMPLIANCE		<u> </u>
I hereby certify that the rules and rep Division have been complied with a	nuiations of the Oil Conservation		RVATION DIVISION
is true and complete to the best of m	1	Date Approved	JUN - 4 1993
Signature Lila L. Mill	eller Production Applied	By ORIGINAL SIGN	ED BY JERRY SEXTON
EIIa L. MIII Proted Name 5-27-93	Production Analyst Title (918) 583-1791	Title	
	(910) 583-1791 Telephone No		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111

2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.

ACD HOBBS OFFICE

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