

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Gas
☐ Well ☒ Well ☐ Other

2. Name of Operator

SAMSON RESOURCES COMPANY

3. Address and Telephone No.

TWO WEST SECOND STREET TULSA, OK 74103

(918) 593-1791

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1550' FNL & 1980' FWL SEC 19-22S-26E

NM OIL CONS COMMISSION

rawer DE

Artesia, NM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

NMNM34246

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

PFI AMOCO "19" FEDERAL #4

9. API Well No.

30-015-25292

10. Field and Pool, or Exploratory Area

FILAREE DOME - DELAWARE

11. County or Parish, State

EDDY, NEW MEXICO

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other **P & A Extension**

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

SAMSON RESOURCES COMPANY requests a 90 day extension of original approval sent August 26, 1994 and approved September, 29, 1994. A P&A procedure and a wellbore schematic were mailed at that time.

14. I hereby certify that the foregoing is true and correct

Signed

[Signature]

Title

District Engineer

Date

12/15/94

(This space for Federal or State office use)

Approved by

(ORIG. SENT 10/6/94)

Title

DEPARTMENT ENGINEER

Date

1/10/95

Conditions of approval, if any: