

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1 S.
Artesia, NM

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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
FREDONIA RESOURCES INC

3. Address and Telephone No.
211 E Tyler Street Ste 300 Longview Tx

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FNL & 1980' FWL SEC. 11 24S 27E 75601

Lease Designation and Serial No.

SCR 193

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

SMITH "11" COM 1

9. API Well No.

30 015 23898

10. Field and Pool, or Exploratory Area

BLACK RIVER MORROW

11. County or Parish, State

EDDY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	CHANGE OF OPERATOR
	Effe 7-1-98

(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.)

CHANGE OF OPERATOR FROM SAMSON RESOURCES COMPANY
EFFECTIVE 7-1-1998

New Operator: Fredonia Resources Inc.
B&M Bond No. NM2657

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

Signed [Signature] Title President Date 6/29/98

(This space for Federal or State office use)

Approved by [Signature] Title Supervisor Date 10-9-98

Conditions of approval, if any: