

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  
 Revised March 25, 1999

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

WELL API NO.  
 30-025 - 01037

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:  
 STATEZ A/C 1

8. Well No. #4

9. Pool name or Wildcat  
 Bagley

**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

2. Name of Operator  
 SAMSON RESOURCES

3. Address of Operator  
 TWO WEST SECOND STREET TULSA OK

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

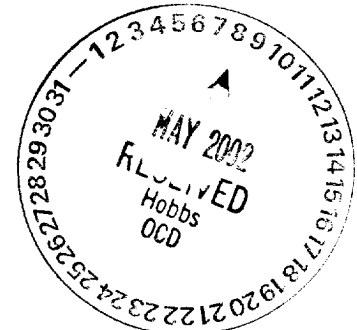
10. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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 recompilation.

mit FAILED - CHANGE PACKER - TEST Tubing To 7000 PSI  
 PACKER SET 11749' TEST 7"-3 1/2 Annulus To 400 PSI  
 FOR 30 min Final 370 PSI



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Floyd Steed TITLE Production Foreman DATE 5-8-02

Type or print name FLOYD STEED Telephone No. 915-631-4030

(This space for State use)

APPROVED BY \_\_\_\_\_ ORIGINAL SIGNED BY GARY W. WINK DATE MAY 15 2002  
 Conditions of approval, if any: \_\_\_\_\_ OC FIELD REPRESENTATIVE II/STAFF MANAGER

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