

NMOC

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135

**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**

3. Address and Telephone No.  
**TWO WEST SECOND STREET, TULSA, OK 74103-3103 (918) 583-1791**

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

**Surface: 810' FNL & 660' FEL Sec. 15-20S-33E**

5. Lease Designation and Serial No.

**NM-01059**

6. If Indian, Allottee or Tribe Name

**N/A**

7. If Unit or CA, Agreement Designation

**N/A**

8. Well Name and No.

**Bandit 15 Federal Com #1**

9. API Well No.

**30-025-37230**

10. Field and Pool, or Exploratory Area

11. County or Parish, State

**Lea, New Mexico**

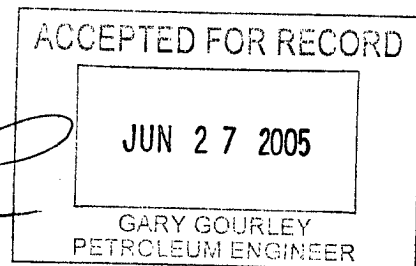
**12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                    | TYPE OF ACTION   |
|---|--|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Abandonment                                       |
| <input checked="" 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 <b>1st Int. Casing Exception</b> |
|   | <input type="checkbox"/> Change of Plans                                   |
|   | <input type="checkbox"/> New Construction                                  |
|   | <input type="checkbox"/> Non-Routine Fracturing                            |
|   | <input type="checkbox"/> Water Shut-off                                    |
|   | <input type="checkbox"/> Conversion to Injection                           |
|   | <input type="checkbox"/> 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.)

**6/21/2005 Verbal permission from BLM/ Gary Gorley to drill deeper and set 11 3/4" casing at 3,398'.**



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

Signed **Todd Wiley**

Title **Drilling Engineer**

Date **June 22, 2005**

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side