A	OCD-HOBBS	
Form 3160-5 (June 1990)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
SUN Do not use this	Source Section	<ol> <li>Lease Designation and Serial No. BLM #NM080262</li> <li>If Indian, Allottee or Tribe Name</li> </ol>

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SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of WellOilGas	8. Well Name and No.
2. Name of Operator	8. Well Name and No. Lea Federal Unit #20
SAMSON RESOURCES COMPANY  3. Address and Telephone No.	9. API Well No.
TWO WEST SECOND STREET, STE. 2350B, TULSA, OK 74103 (918) 591-1791	30-025-37012 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	1.
990' FNL 1750' FEL, Sec. 14-T20S-R34E, Lea County, NM	Lea 11. County or Parish, State
	Lea County, NM

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

TYPE OF SUBMISSION		
	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
x Subsequent Report	Recompletion Plugging Back	New Construction
		Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other Site Security Diagram	Dispose Water
	(Revised)	(Note: Report results of multiple completion on Well

Completion or Recompletion Report and Log form.)
 Completion and Log form.)
 directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Please tind attached a Revised Site Security Diagram for the Lea Federal Unit #20 in Lea County, NM.

14. I hereby certify that the foregoing is true and correct			- West Control of the second		
Signed before Bedingtend	Title	Environmental & Safety Tech Date	7/7/2006		
(This space for Federal or State office use)					
Approved by Conditions of approval, if any:	Title	Date			
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 I	nstruction on Reverse Side			

Valve # Description/Type		Production Phase	Sales Phase	Other Prod. Activities Phase	
1	4" Steel Shipping Line/4" Plug Valve	Closed/Sealed	Open/Not Sealed	Circulating: N/A Drawing Off Water; N/A	
2	2" Steel Recycle Line/2" Plug Valve	Closed/Sealed	Open/Not Sealed In Use	Circulating: Open/Not Sealed Drawing Off Water: Closed/Sealed	
3	2" Steel Recycle Line/2" Plug Valve	Closed/Not Sealed	Open/No Seal In Use	Circulating: Open/Not Sealed Drawing Off Water: Closed/Not Sealed	
4	2" Steel Oil Fill Line/2" Plug Valve	Open/Not Sealed	Closed/Sealed	Circulating: N/A Drawing Off Water: N/A	
5	2" Steel Water Fill Line/2" Plug Valve	Open/No Seal	Open/No Seal	Circulating: N/A Drawing Off Water:	
6	4" Steel Equalizer Line/2" Plug Valve	Open/No Seal	Closed/Sealed	Circulating: N/A Drawing Off Water: N/A	
7	4" Steel Equalizer Line/4" Plug Valve	Open/No Seal	Open/No Seal	Circulating: N/A Drawing Off Water: N/A	
8	2" Steel Vent Line/2" Plug Valve	Open/No Seal	Open/No Seal	Circulating: N/A Drawing Off Water: N/A	
9	4" Steel Shipping Line/4" Plug Valve	Closed/No Seal	Open/No Seal	Circulating: N/A Drawing Off Water: N/A	



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