| Energy, Minerals and Natural Resources   May 27, 2004  | Submit 3 Copies To Appropriate District Office                 | State of New M                           |                       | Form C-103                                       |  |
|--|--|--|-----------------------|--|--|
| District    | District I   | Energy, Minerals and Natural Resources   |                       |  |  |
| OL CONSERVATION DIVISION   |  |  |                       | i l  |  |
| 1200 Sol Brazos Rd, Azec, NM 87410   1220 SOLURI St. Francis Dr.   STATE   FEE   |  | OIL CONSERVATION                         | N DIVISION            |  |  |
| District IV   1220 S. It Provice Dr., Santa Fe, NM 87505   S. State Oil & Gas Lease No. 15995   SUNDRY NOTICES AND REPORTS ON WELLS   SUNDRY NOTICES AND REPORTS ON WELLS   The Provided History of    |  | 1220 South St. Fra                       | ncis Dr.              |  |  |
| 12995   17900   15995   17900   15995   17900   17900   17900   17900   17900   17900   17900   17900   17900   17900   17900   17900   18900   1990   |  | Santa Fe, NM 8                           | 7505                  |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS   7. Lease Name or Unit Agreement Name   DONOT USE THIS FORM FOR PROPOSALS 10 DRIPERSON REPUBLICATION FOR PERMIT (FORM C-101) FOR SUCH   STATE BD   8. Well Number   1   2. Name of Operator   2. Name of Operator   2. Name of Operator   2. Name of Operator   3. Address of Operator   2. Name of   | 1220 S. St. Francis Dr., Santa Fe, NM                          | ,  |                       | I  |  |
| DONOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLIG FACK TO A DEFERENCY CORRESPONCE. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well   Gas Well   Other   9. OGRID Number   20165   3. Address Operator   10. Pool name or Wildcat   10. Po   |  | ICES AND REPORTS ON WELL                 | S                     | 7. Lease Name or Unit Agreement Name             |  |
| 1. Type of Well: Oil Well  | (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLI | SALS TO DRILL OR TO DEEPEN OR PI         | LUG BACK TO A         |  |  |
| 2. Name of Operator   20165   3. Address of Operator   10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   200 N. Loraine St., Ste 1010; Midland, TX 79701   10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   200 N. Loraine St., Ste 1010; Midland, TX 79701   20165      |  | Gas Well  Other                          |                       |  |  |
| SAMSON RESOURCES COMPANY   2016S   |  |  |                       |  |  |
| 10. Pool name or Wildcat   200 N. Loraine St., Ste 1010; Midland, TX 79701   Bagley; Siluro Devonian   | 1 -  | A STO A DATE                             |                       |  |  |
| 200 N. Loraine St., Ste 1010; Midland, TX 79701   Bagley; Siluro Devonian  |  | MPANY                                    |                       |  |  |
| Well Location  | _  | Midland TV 70701                         |                       | 1  |  |
| Unit Letter H: 1980 feet from the North line and 660 feet from the East line Section 2 Township 128 Range 33E NMPM Lea County  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4243' DF  Pit or Below-grade Tank Application   or Closure   Pit Upe Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water   Pit Liner Thickness: mill Below-Grade Tank: Volume bbls; Construction Material  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE COMPL   COMMENCE DRILLING OPNS   PAND A    OTHER: OTHER: OTHER:  13. 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 recompletion.  Casing is collapsed at top of fish at 6585'. Attempt was made to pump into the well. Set packer above TOF. Tested annulus to 500. Could not pump below packer at 4000 psi. Rean shoe. Cleaned off fish. No fill. Attempt to run wireline into tubing. Unsuccessful. Tubing is plugged or collapsed.  Recommend setting CIBP at 6565' and dumping 35' cement cap.  Test casing to 500 and obtain chart.  Classify well as TA.  TITLE District Engineer  NOV 0 7 2006  APPROVED BY: Lawwww. Water State |  | viidiand, 1A 79701                       |                       | bagiey;Shuro Devoman                             |  |
| Section 2   Township 12S   Range 33E   NMPM   Lea   County   |  | set from the North line and 660          | fact from the Ea      | at line  |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  |  |                       |  |  |
| August   A   | Section 2  |  |                       |  |  |
| Pit type   | 1962年第二屆 中華中 12  |  | K, KKD, K1, GK, eic., | " <b>在</b> 是一个是一个是一个                             |  |
| Pit Liner Thickness:   mil   Below-Grade Tank: Volume   bobis; Construction Material   | Pit or Below-grade Tank Application .                          |  |                       |  |  |
| Pit Liner Thickness:   mil   Below-Grade Tank: Volume   bobis; Construction Material   | Pit type Depth to Groundwat                                    | er Distance from near                    | est fresh water well  | Distance from nearest surface water              |  |
| NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A   CASING/CEMENT JOB   PAND A   CASING/CEMENT JOB   OTHER:   OTH |  |  |                       |  |  |
| NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS.   P AND A   CASING/CEMENT JOB    OTHER:   OTHER: | Colombia Colombia  | ,  |                       |  |  |
| PERFORM REMEDIAL WORK  PLUG AND ABANDON  CHANGE PLANS  COMMENCE DRILLING OPNS. ALTERING CASING  PAND A  PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB  CASING/CEMENT JOB  CASING/CEMENT JOB  THER:  13. 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 recompletion.  Casing is collapsed at top of fish at 6585'. Attempt was made to pump into the well. Set packer above TOF. Tested annulus to 500. Could not pump below packer at 4000 psi. Ran shoe. Cleaned off fish. No fill. Attempt to run wireline into tubing. Unsuccessful. Tubing is plugged or collapsed. Recommend setting CIBP at 6565' and dumping 35' cement cap. Test casing to 500 and obtain chart. Classify well as TA.  Thereby certify that the information above is true and complete to the best of my knowledge and being a further write that any pit or below-grade tank has been will be constructed or closed according to NMOCD guidelines , a general pehre or an (attached) alternative OCD-approved plan SIGNATURE  TITLE District Engineer  TITLE District Engineer  TITLE District Engineer  TITLE District Engineer  NOV 0 7 2006  NOV 0 7 2006  TITLE DISTRICT MANAGATE  | 12. Check I  | Appropriate Box to indicate is           | valure of Notice,     | Report of Other Data                             |  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A DULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB COMMENCE DRILLING OPNS. PAND A CASING COMMENCE DRILLING OPNS. PAND A CASING COMMENCE DRILLING OPNS. PAND A CASING C | NOTICE OF IN   | ITENTION TO:                             | SUB                   | SEQUENT REPORT OF:                               |  |
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| Type or print name Kenneth D. Krawietz E-mail address: kkrawietz@samson.com Telephone No. (432) 683-7063  NOV 0 7 2006  APPROVED BY: TITLE   | $\gamma / M$   |  | \ <b>^</b>            | $\Lambda V$                                      |  |
| APPROVED BY: Lary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGEME  | SIGNATURE 1  | THEE_                                    | District Engineer     |  |  |
| APPROVED BY: Lary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGEME  | Type or print name Kenneth D. k                                | <u>Crawietz</u> E-mail address: <u>k</u> | krawietz@samson.c     | om Telephone No. (432) 683-7063                  |  |
| APPROVED BY: LOUIS TITLE TITLE TITLE TITLE   |  | ^  | -                     | NOV O P Ana                                      |  |
|  | 9/   | OCF                                      | IELD REPRESENTAT      | TIVE ILICTATE MANAGEMENT OF ZUUL                 |  |
|  |  | U. WINK TITLE                            |                       | o ivit i karin'iliane                            |  |