

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
May 27, 2004

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

WELL API NO. 30-025-38482
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Osudo 29 State
8. Well Number 002
9. OGRID Number 20165
10. Pool name or Wildcat Osudo Morrow North (Gas)

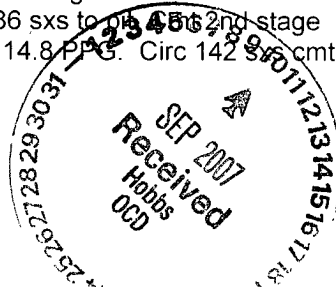
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Samson Resources Company	
3. Address of Operator Two West Second St. Tulsa, Ok 74103	
4. Well Location Unit Letter <u>H-A</u> : <u>1300</u> feet from the <u>North</u> line and <u>1025</u> feet from the <u>East</u> line Section 29 Township 20 South Range 36 East NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3619'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil 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 <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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: _____	Spud Well <input type="checkbox"/>	OTHER: _____	<input type="checkbox"/>

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.

9/1/2007 Cmt 9 5/8" 40# HCK-55 BT&C Csg w/ float shoe @ 5170' and DV Tool @ 2512' Cmt 1st stage w/ 455 sxs Premium Plus Interfill w/ 1/8#s/sx Pol E Flake @ 11.5 PPG and 760 sxs Premium Plus @ 14.8 PPG circ 186 sxs to pit. 9/2/2007 Test BOP's to 250 low & 5000 high & hydrill 250 low & 2500 high.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Brennan Short Brennan Short TITLE Drilling Engineer DATE 5/21/2007

Type or print name
For State Use Only

E-mail address:

Telephone No.

APPROVED BY: Larry W. Wink
Conditions of Approval (if any):

OCD FIELD REPRESENTATIVE W/STAFF MANAGER
TITLE _____

DATE SEP 11 2007