

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. 30-025-37453
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 Eagle 2 State
8. Well Number 1
9. OGRID Number 20165
10. Pool name or Wildcat Lea;Pcnn

**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  
1010 N Loraine Street, Suite 1010; Midland, TX 79701

4. Well Location  
 Unit Letter O : 660 feet from the South line and 1600 feet from the East line  
 Section 2 Township 20S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3667 GR

Fit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ 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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input checked="" type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: Perf and test Upper Morrow <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.

Kill well w/7% KCL. ND tree. NU 5k BOP. Rls pkr and POH.  
 RU WL and 5k lub. Set CIBP @ 13220' and test. Perf Upper Morrow 13096'-98', 13110'-20'.  
 GIH w/CA as pulled. Set pkr @ 13000'. ND BOP. NU tree. Swab test.  
 Acdz w/300 gal 7 1/2% NEFE, swab test. Evaluate  
 If frac, kill well w/7% KCL. ND tree. NU BOP. Rls pkr and POH.  
 Frac w/50000 gal 70Q CO2 foam and 50000# 20/40 bauxite @ 25 bpm, 7000 psi.  
 ND tree saver. Flow test.  
 RU WL and 5k lub.  
 Set 10k retv pkr and CA as pulled w/pump out plug on WL @ 13000'. ND frac valves.  
 GIH w/on off tool on 2 3/8" prod tbg. ND BOP. NU tree. Pump out plug. Kick well off and test.  
 NOTE: when FTP is low enough, can drill hole in CIBP to commingle Lower Morrow zone.  
 No H2S

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 *Ken Krawietz* TITLE District Engineer DATE 10/28/2007

Type or print name Ken Krawietz E-mail address: kkrawietz@samson.com Telephone No. (432) 683-7063

**For State Use Only**  
 APPROVED BY: *Chris Williams* TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE NOV 02 2007  
 Conditions of Approval (if any):