

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit or CA/Agreement, Name and/or No
2. Name of Operator Samson Resources Company		8. Well Name and No. Pubco Federal Com #2
3a. Address 200 N. Loraine St., Ste 1010; Midland, TX 79701	3b. Phone No (include area code) (432) 683-7063	9. API Well No. 30-025-36505
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1944' FNL & 1980' FWL Sec. 2-21S-32E <i>Unit F</i>		10. Field and Pool, or Exploratory Area Hat Mesa; Morrow
		11. County or Parish, State Lea NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Isolate</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Lower Morrow</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation have been completed and the operator has determined that the final site is ready for final inspection.)

Kill well. ND tree. NU BOP. RIs pkr. POH. RU coiled tubing.
GIH. Circ. Drill out plugs @ 14015' and 14020'. Clean out to PBTd.
Circ clean. Jet dry. POH.
RU WL and lubricator. RIH w/retv pkr and assembly. Set pkr.
Bleed off pressure. Load hole.
GIH w/tubing. Space out. Circ pkr fluid. Test to 1000.
ND BOP. NU tree.
Swab well in. Flow test. Check CO2 content.
No H2S

MAR 26 2008
HOBBS OCD

APPROVED
MAR 24 2008
JAMES A. AMOS SUPERVISOR-EPS

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Kenny Krawietz

Title District Engineer

Signature

Date 2/4/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Chris Williams

OC DISTRICT SUPERVISOR/GENERAL MANAGER

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office