

District I
PO Box 1988, Hobbs, NM 88240-1988
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Grande Rd., Alamogordo, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

APL Number 30-025-26942	Pool Code 13390	Well Name Crazy Horse Lost Delaware
Property Code 009925	Property Name West Tonto Federal	Well Number 1
OGED No. 020165	Operator Name SAMSON RESOURCES COMPANY	Location 3582.6

10 Surface Location

UL or loc. no.	Section	Township	Range	Lot 1/4	Feet from the	North/South line	Feet from the	East/West line	County
L	24	19S	32E		1980	South	660	West	LEA

11 Bottom Hole Location If Different From Surface

UL or loc. no.	Section	Township	Range	Lot 1/4	Feet from the	North/South line	Feet from the	East/West line	County

12 Deducted Acres 32.040	13 Joint or Infill	14 Consolidating Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p>16</p>	<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p>Signature Janet Reed</p> <p>Printed Name Janet Reed</p> <p>Title Production Analyst</p> <p>Date 1-22-97</p>
	<p>18 SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor:</p>
	<p>Certificate Number</p>

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
P.O. Box 1980
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Gas
☐ Well ☒ Well ☐ Other

2. Name of Operator

Samson Resources Company

3. Address and Telephone No.

2 West 2nd Street Tulsa, OK 74103

(918) 583-1791

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 660' FWL Sec. 24-19S-32E

5. Lease Designation and Serial No.

NM-12413

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SCM1551

8. Well Name and No.

West Tonto Federal Com. #1

9. API Well No.

30-025-26942

10. Field and Pool, or Exploratory Area

Lusk

11. County or Parish, State

Lea, NM

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

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☒ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Samson Resources Company requests the approval of the attached Recompletion Procedure.

RECEIVED
JUL 30 1 21 PM '96
BUREAU OF LAND MGMT
HOBBS, NM

14. I hereby certify that the foregoing is true and correct

Signed [Signature]

Title

District Engineer

Date

7/23/96

(This space for Federal or State office use)

Approved by [Signature]

Title

PETROLEUM ENGINEER

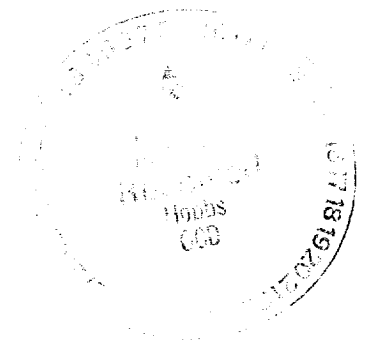
Date

AUG 02 1996

Conditions of approval, if any:

1. MIRU WO rig. ND wellhead. NU BOP. Release packer and POH with tbq.
2. RU EL. RIH with a CIBP and set at \pm 13,200'. Dump 5 sx (approx. 50') Class "C" cement on top of CIBP to satisfy BLM plug requirement.
3. RIH with CCL and casing gun. Perforate squeeze holes from 6110' to 6111'. POOH with perforating gun.
4. RIH with cement retainer on EL and set at 6090'. POOH and RD EL. RIH with SN on 2-7/8" tubing. Partially sting into retainer and pressure test tubing to 2000 psi.
5. Lower tbq and RU cementers. Establish injection into squeeze holes with 2% KCl. Pump 20 bbls "mud flush" ahead of cement. Pump 100 sxs Class H mixed in 2% KCl base into perforations. Monitor surface pipe throughout job. Displace cement to top of retainer with 35 bbls 2% KCl. Unsting and reverse out excess cement. POOH with tubing.
6. RU electric line. Run CBL from PBTD to 5500' (or 100' above noted cement top if it is above 5500'). Re-run CBL under 1000 psi pressure, if necessary. If cement isolation has not been achieved, prepare to re-squeeze (prognosis will be provided when conditions are known).
7. RIH with SN and tbq to 3500'. RU swab and swab well down to 2300'. RD swab and POH with tubing.
8. Perforate Delaware at 5,986-6,036'.
9. TIH with tbq and packer. Set packer at \pm 5,950'. RU stimulation company and acidize perfs with 3,000 gal 7-1/2 % NEFE acid. Drop 150 1.3 SG RCN balls spaced evenly throughout acid stage. Treat perfs at 4-5 BPM. Anticipated treating pressure 3000 psig. **MAXIMUM TREATING PRESSURE 5000 PSIG**. Flush to top perf with 2 % KCl. Release packer and lower to 6,050' to knock balls off perfs. Reset packer at \pm 5,950' and swab test well.
10. Release packer and POH with tbq. Frac Delaware perfs down casing.
11. Flow/swab test well.
12. TIH with mud anchor, perforated sub, SN, TAC, and tubing. ND BOP and NU wellhead. TIH with pump assembly and rods and hang well on pumping unit. NU stuffing box. RDMO completion rig. Take samples of all fluids recovered for analysis.
13. Return well to sales.

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 BUREAU OF LAND MGMT
 HOENES, NM



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
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SUBMIT IN TRIPLICATE

1. Type of Well
Oil Gas
☐ Well ☒ Well ☐ Other
2. Name of Operator
SAMSON RESOURCES COMPANY
3. Address and Telephone No.
TWO WEST SECOND STREET TULSA, OK 74103 (918) 583-1791
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FSL & 660' FWL SEC. 24-19S-32E

5. Lease Designation and Serial No.
NM-12413
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
SCM1551
8. Well Name and No.
WEST TONTO FEDERAL COM. #1
9. API Well No.
30-025-26942
10. Field and Pool, or Exploratory Area
LUSK
11. County or Parish, State
LEA, NEW MEXICO

12 **CHECK APPROPRIATE BOX(S) 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"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other FLARE GAS	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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Flare gas to evaluate gas and fluid production for more efficient production at a lower wellhead pressure for a period of 10 days starting on June 28, 1993.

RECEIVED
JUN 21 9 45 AM '93

14. I hereby certify that the foregoing is true and correct

Signed *David R. Glass* Title **District Engineer** Date **June 21, 1993**

(This space for Federal or State office use)

Approved by **(ORIG. SGD) DAVID R. GLASS** Title **Petroleum Engineer** Date **JUN 30 1993**

Conditions of approval, if any:

RECEIVED

SEP 1 1993

D HOBBS
OFFICE