

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
TULSA, OK 74101-0198
FORM APPROVED 88240
NEW MEXICO
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.
TWO WEST SECOND STREET TULSA, OK 74103 (918) 583-1791

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 660' FWL SEC. 11-20S-33E

5. Lease Designation and Serial No.
NMNM17238

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
SMITH RANCH FEDERAL #1

9. API Well No.
30-026-26810

10. Field and Pool, or Exploratory Area
TEAS

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 <u>Approval to measure gas off lease</u>	<input type="checkbox"/> 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 approval to measure gas production off lease at NW Sec. 11-20S-33E, off County Rd. 176

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

Signed John B. Baker Title Production Analyst Date December, 30 1994

(This space for Federal or State office use)

Approved by Orig. Signed by Adam Salameh Title Petroleum Engineer Date 2/6/95

Conditions of approval, if any:

- SEE ATTACHED -

(rev. 2/25/93)

BUREAU OF LAND MANAGEMENT
CARLSBAD RESOURCE AREA

Off Lease Storage/Measurement

Conditions of Approval

Approval of off lease storage/measurement and sales is subject to the following conditions of approval:

1. This agency be notified of any change in your sales method or location of the sales meter.
2. This agency shall be notified of any spill or discharge as required by NTL-3A.
3. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
4. This approval does not constitute right-of-way approval for any off lease activities. You need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.