

UNITED STATES N.M. Oil Cons. Division
DEPARTMENT OF THE INTERIOR P.O. Box 1980
BUREAU OF LAND MANAGEMENT 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 <input type="checkbox"/> Gas <input type="checkbox"/> <input checked="" type="checkbox"/> Well <input type="checkbox"/> Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. NMNM17439 |
| 2. Name of Operator Samson Resources Company | 6. If Indian, Allottee or Tribe Name |
| 3. Address and Telephone No. 2 West 2nd Street Tulsa, OK 74103 (918) 583-1791 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SE/4 NE/4 Section 10-20S-33E | 8. Well Name and No. Tonto Federal #1 |
| | 9. API Well No. 30-025-29265 |
| | 10. Field and Pool, or Exploratory Area Bone Teas Springs |
| | 11. County or Parish, State Lea, NM |

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 checked="" type="checkbox"/> Abandonment |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input type="checkbox"/> Other |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Conversion to Injection |
| | <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 of the attached plugging procedure.

RECEIVED
JUL 30 1 22 PM '96
BUREAU OF LAND MGMT
HOBBS, NM

| | |
|---|--|
| 14. I hereby certify that the foregoing is true and correct | |
| Signed <u>DAVID R. GLASS</u> Title <u>District Engineer</u> Date <u>7/23/96</u> | |
| (This space for Federal or State office use) | |
| Approved by <u>DAVID R. GLASS</u> Title <u>PETROLEUM ENGINEER</u> Date <u>AUG 08 1996</u> | |
| Conditions of approval, if any: | |

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

*See Instruction on Reverse Side