

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator		Well API No.
SAMSON RESOURCES COMPANY		30-025-11393-00-51
Address Two West Second Street Tulsa, OK 74103		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Operator	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate
Effective 3-1-93		
If change of operator give name and address of previous operator Geodyne Operating Company 320 South Boston Tulsa, OK 74103-3708		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Westates Federal	Well No. 8	Pool Name, including Formation Justis Fusselman, North	Kind of Lease State/Federal or Tax XXXX	Lease No. NMLC-032579E
Location Unit Letter E 1620 Feet From The North Line and 330 Feet From The West Line Section 1 Township 25-S Range 37-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Shell Pipeline Corporation	or Condensate Phillips Pet	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2648, Houston, Texas 77252
Name of Authorized Transporter of Casinghead Gas Sid Richardson Carbon & Gasoline Co.	or Dry Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1225, Jal, New Mexico 88252
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 1
	Twp. 25S	Rge. 37E
	Is gas actually connected? Yes	
	When? 1962	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Lila L. Miller
Lila L. Miller Production Analyst
Printed Name Title
Date 5-27-93 Telephone No. (918) 583-1791

OIL CONSERVATION DIVISION

JUN - 4 1993

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

JUN 9 1993

WCD HOBBS OFFICE