Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-04362 5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE S FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			E-5146
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			State E 28
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 4
2. Name of Operator Finley Resources, Inc.			9. OGRID Number 180387
3. Address of Operator			10. Pool name or Wildcat
1308 Lake Street, Ste. 200, Fort Worth, Texas 76102			Eumont: Yates-7 Rivers-Queen
4. Well Location			
Unit Letter L: 1980' feet from the South line and 990' feet from the West line			
Section 28 Township 20S Range 36E NMPM County Lea			
	11. Elevation (Show wheth 3619' KB	her DR, RKB, RT, GR, etc.,	
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Grounds	vaterDistance from neares	it fresh water well Dist	ance from nearest surface water
Pit Liner Thickness: mil			nstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON		COMMENCE DRI	_ :=:=::::::= =::::= =
PULL OR ALTER CASING		CASING/CEMENT	<u> </u>
OTHER:	E	OTHER: Well In	ntegrity 🖂
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
GIH w/ retrievable DD to 2514. Test some w/resharts 500# Test on Co. 24501			
GIH w/ retrievable BP to 3514'. Test same w/packer to 500#. Test csg from 3450' to surface to 500#. Lost 300# in 3 minutes. Witnessed by NMOCD. Isolated leak between 798' to 859'. RDMO.			
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE / Asau	L. Home TIT	LE: Production & Operation	ons Engineer DATE 10/12/05
Type or print name James L. Nan		.nance@finleyresources.co	m Telephone No. (817) 231-8727
APPROVED BY: OU WILL OF FIELD REPRESENTATIVE II/STAFF MANAGER OC FIELD REPRESENTATIVE II/STAFF MANAGER OTHER DATEDOT 2 4 2005			
APPROVED BY:) /) in h ac	FIELD REPRESENTATIVE	IN CONTRACT
Conditions of Approval (if any):	M M M	LE	DATIOCT 2 4 2005
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