

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-04354
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 1150038
7. Lease Name or Unit Agreement Name State E 27
8. Well Number 1
9. OGRID Number 180387
10. Pool name or Wildcat Eumont: Yates-7 Rivers-Queen

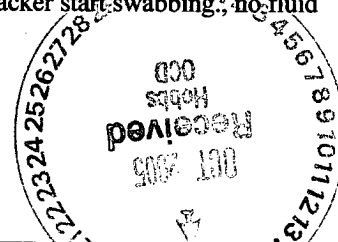
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Finley Resources, Inc.	
3. Address of Operator 1308 Lake Street, Ste 200, Fort Worth, Texas 76102	
4. Well Location Unit Letter _____ M: 660' _____ feet from the _____ South _____ line and _____ 660' _____ feet from the _____ West _____ line Section 27 Township 20S Range 36E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3609' KB	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Well Integrity <input checked="" type="checkbox"/>	

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.

. Rih with bit, scraper, POH with bit, RIH with RBP, packer, set RBP @ 3456'. Test to 500 psi OK. Release packer pull up 2 stands set packer, load csg, 6 bbls. would not pressure up csg on vac, unseat packer poh with 28 total stands to 1880' test below packer. Good, test above packer no good, 2 bpm @ 50 PSI, Unseat compression packer poh, get ready to run tension packer. RIH with 5 1/2" tension packer to 1261' no good, 1290' tested good, 526' good. Bad from 526' to 1290'. 2 bpm @ 50 psi. Pull up 30' set packer start swabbing, no fluid entry after 1 hr, rig dn swab. POH with packer put on retrieving head RIH release RBP.



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 OGD approved plan ☐.

SIGNATURE James L. Nance TITLE Western District Mgr DATE 10/12/05

Type or print name James L. Nance E-mail address: jim.nance@finleyresources.com Telephone No. (505) 231-8727  
For State Use Only

APPROVED BY: Gary W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_

OCT 24 2005