

RECEIVED

OCT 17 2005

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

OIL CONSERVATION DIVISION

WELL API NO.

30-025-04361

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-5146

7. Lease Name or Unit Agreement Name

State E 28

8. Well Number 3

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 ☒ Gas Well ☐ Other ☐

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 990' feet from the West lineSection 28 Township 20S Range 36E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3619' KB

Pit or Below-grade Tank Application ☐ or Closure ☐

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:

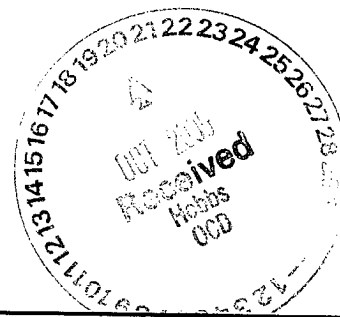
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☒ MULTIPLE COMPL ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: Well Integrity ☐

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.

Determine free point in 5 1/2" casing below bad pipe area (153'-1508'). Cut and pull as deep as possible. Inspect and rerun as much csg as possible making up with additional pipe. Using bowl assembly and float collar, connect to and cement 5 1/2" csg from cut to surface. CO and test to 500 psi.



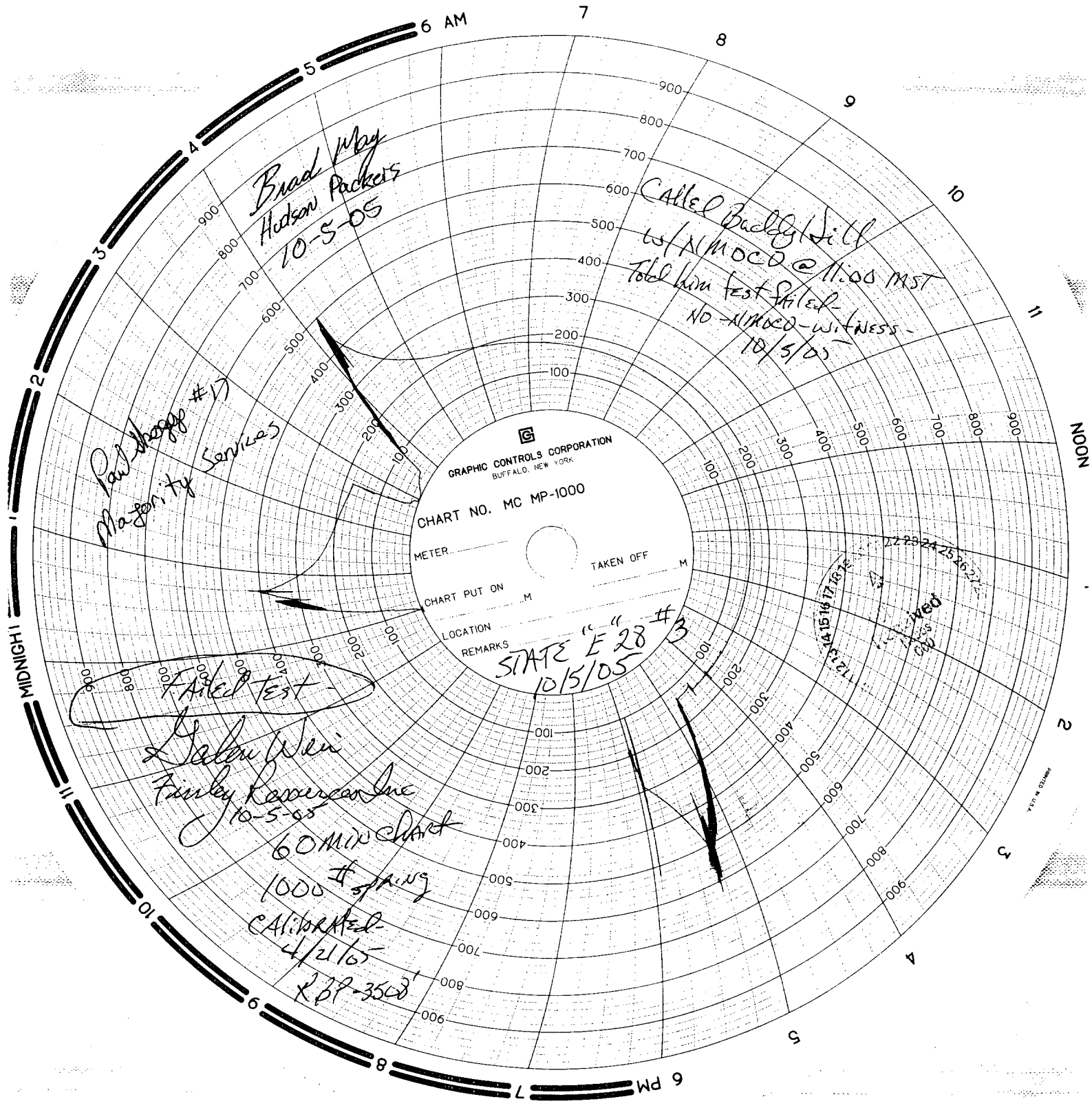
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE James L. Nance TITLE: Production & Operations Engineer DATE 10/14/05Type or print name James L. Nance E-mail address: jim.nance@finleyresources.com Telephone No. (817) 231-8727

For State Use Only

APPROVED BY: Gray W. White TITLE: OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE OCT 24 2005

Conditions of Approval (if any):



Brad May
Hudson Packers
10-5-05

Called Buddy with
w/ALMOCO @ 11:00 MST
Told him test failed-
NO ALMOCO-WITNESS-
10/5/05

Paul May #17
Maternity Services

Failed Test

Taken from
Finley Research Inc
10-5-05
60 min chart
1000 # spring
CALIBRATED
4/2/05
RBP-3503

STATE "E" 28 #
10/5/05

11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30