Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

HOBBS OCD

FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014

OCT 2 9 2013

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an VED
STEP STEP STEP STEP STEP STEP STEP STEP

SUBMIT IN TRIPLICATE – Other instructions on page 2.			7. If Unit of CA/Agree	7. If Unit of CA/Agreement, Name and/or No.	
I. Type of Well					
Oil Well Gas Well X Other			8. Well Name and No. Rock Queen Unit #66		
2. Name of Operator Celero Energy II, LP		9. API Well No. 30-005-00862			
a. Address	3b.	Phone No. (include area code)	10. Field and Pool or		
400 W. Illinois, Ste. 1601	Midland TX 79701	(432)686-1883	Caprock; Que	en	
Location of Well (Foolage, Sec.,/I Sec 25, T13S, R31E 660' FSL & 660' FEL	,R.,M., or Survey Description)		11. County or Parish, Chaves NM	State	
	ECK THE APPROPRIATE BOX(E	S) TO INDICATE NATURE OF		ER DATA	
TYPE OF SUBMISSION		ТҮРЕ О	F ACTION		
Notice of Intent	Acidize Alter Casing	Deepen X Fracture Treat	Reclamation	Water Shut-Off Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete	X Other	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporarily Abandon Water Disposal	· · · · · · · · · · · · · · · · · · ·	
	·				
			*		
	·		·		
 1 hereby certify that the foregoing is 	true and correct. Name (Printed/Typ.	ped)			
4. 1 hereby certify that the foregoing is Lisa Hunt	true and correct. Name (Printed/Typ.	ned) Title Regulatory	Analyst		
	true and correct. Name (Printed/Typ.		, , , , , , , , , , , , , , , , , , , ,		
Lisa Hunt	Aunt	Title Regulatory			
Lin	Aunt	Title Regulatory Date 06/26/2013	OFFICE USE	Date	

Title 18 U.S.C. Section 1001 and Title 46 U.S.C. Section 1001 and (Instructions on page 2)

entitle the applicant to conduct operations thereon.