Submit I Copy To Appropriate Districts OCO	State of New Me	xico	Form C-103
1625 N. French Dr., Hobbs, NM 88240 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Revised August 1, 2011 WELL API NO.
			30-025-00209
			5. Indicate Type of Lease
District III - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 South St. Francis Dr. District IV - (505) 476-3460 1220 South St. Francis Dr. Santa Fe, NM 87505			STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			9, 5,5,5,6
87505 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			North Caprock Celero Queen Unit
PROPOSALS.)			8. Well Number 27
Type of Well: Oil Well Gas Well Other Injection Name of Operator Celero Energy II, LP			9. OGRID Number
Celero Energy II, LP			247128
3. Address of Operator ₄₀₀ W. Illinois, Ste. 1601 Midland, TX 79701			10. Pool name or Wildcat
4. Well Location			Caprock; Queen
Unit Letter L: 1980 feet from the S line and 660 feet from the W line			
Section 32 Township 12S Range 32E NMPM County Lea			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
4372'			
12. Check Appropriate E	Box to Indicate N	ature of Notice,	Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			
TEMPORARILY ABANDON			-
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN			гјов 🗆
DOWNHOLE COMMINGLE			
OTHER: Squeeze perfs	X	OTHER:	
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
RU cementing company to 4-1/2"-by-7" annulus. Establish injection rate at less than 150 psi and pump up to 200 sx Cl C with 2%			
CaCl2 down annulus. Hesitate/squeeze perforations in 7" to 350 psi.			
Closed loop system will be used.			
Spud Date:	Rig Release Da	ate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
	1	,	
SIGNATURE LISA THINK I	TITLE Regula	itory Analyst	DATE 10/20/2012
	TITEL Regula	nory Anaryst	DATE 10/29/2013
Type or print name Lisa Hunt E-mail address: lhunt@celeroenergy.com PHONE: (432)686-1883			
For State Use Only			
APPROVED BY: MULLI STOWN TITLE COMPUSING CIFLED DATE 10/29/2013/			
Conditions of Approval (if any)		1	
-			00T 30 2017