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 8741 DBSO 1220 South St. Francis Dr. District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 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 X Gas Well Other	30-025-00303 5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement/Name
2. Name of Operator CELERO ENERGY II, LP	9. OGRID Number 247128
3. Address of Operator 400 W. Illinois, Ste. 1601 Midland, TX 79701	10. Pool name or Wildcat Caprock; Queen
4. Well Location Unit Letter O: 660 feet from the South line and 2310 feet from the East line Section 30 Township 13S Range 32E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4379' KB 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL COMMENC	SUBSEQUENT REPORT OF: WORK
OTHER: Convert to injector 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.	
 MIRU PU. POOH & LD rods. RIH & C/O well to TD. RIH w/pkr & check csg integrity. RIH w/injection pkr & tbg. RUN MIT. OCD Conditional well bore for approval free ap	tion of Approval: Approval for evaluting or injection. Need injection application om OCD Santa Fe Office. CANNNOT OCD Santa Fe approves injection order.
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE Regulatory Analyst	
Type or print name Lisa Hunt E-mail address: LHunt@ce For State Use Only APPROVED BY: Carry U. TITLE	
Conditions of Approval (if any):	DATE