

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

New Mexico Oil Conservation Division, Hobbs, NM
1625 N. French Drive
Hobbs, NM 88240
APPROVED
OMB No. 1010-0137
Expires: October 31, 2014

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

1055, OCD
MAY 31 2013
RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Lease Serial No. LC-068474
2. Name of Operator Celero Energy II, LP		6. If Indian, Allottee or Tribe Name
3a. Address 400 W. Illinois, Ste. 1601 Midland TX 79701	3b. Phone No. (include area code) (432)686-1883	7. If Unit of CA/Agreement, Name and/or No. Drickey Queen Sand Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 665' FNL & 660' FWL UL: D, Sec 3, T14 S, R31E		8. Well Name and No. Drickey Queen Sand Unit #18
		9. API Well No. 30-005-00977
		10. Field and Pool or Exploratory Area Caprock; Queen
		11. County or Parish, State Chaves NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Injection
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-1 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)
This well has been injecting since 2/13/2013. Also, approval has been received to re-perforate. Copy of sundry is attached.

**Note: Accepted For Record Only!
Approval Subject To Returning
Well To Continuous Injection
And Keeping Well On Continuous
Injection!**

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Lisa Hunt	Title Regulatory Analyst
Signature <i>Lisa Hunt</i>	Date 05/14/2013

ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by /S/ DAVID R. GLASS	Petroleum Engineer	Date 5 13 2013
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title or the rights in the subject lease which would entitle the applicant to conduct operations thereon. DAVID R. GLASS	Title ROSWELL FIELD OFFICE	Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

JUN 4 2 13

OPERATOR'S COPY

Form 3160-5
(March 2012)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS
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5. Lease Serial No.
LC-068474
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

MAY 31 2013

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
Drickey Queen Sand Unit
8. Well Name and No.
Drickey Queen Sand Unit #18

2. Name of Operator
Celero Energy II, LP

9. API Well No.
30-005-00977

3a. Address
400 W. Illinois, Ste. 1601 Midland TX 79701
3b. Phone No. (include area code)
(432)686-1883

10. Field and Pool or Exploratory Area
Caprock; Queen

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
665' FNL & 660' FWL
UL: D, Sec 3, T14 S, R31E

11. County or Parish, State
Chaves NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Ret to inj
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
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- Blow well down. POOH w/injection equipment.
- RIH w/bit and DC's on workstring and clean out to TD. POOH
- RU wireline and re-perforate 2922'-2936' w/4 SPF, 0-degree phasing.
- Run packer on workstring and test injection rate at 600 psi.
- If necessary, acidize w/1500 gals inh. 7-1/2% HCL.
- Run injection packer and tubing, perform MIT, and return well to injection.

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APPROVED FOR 3 MONTH PERIOD
ENDING JUL 18 2013

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Lisa Hunt

Title Regulatory Analyst
Petroleum Engineer

Signature *Lisa Hunt*

Date 04/15/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

MAY 31 2013

Approved by *David R. Glass*
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

PETROLEUM ENGINEER
Title
Date APR 18 2013
Office ROSWELL FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

JUN 04 2013