Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources			Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, wither als and water at Resources		WELL API NO.	30-025-10627
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE [FEE X
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505 Francis Dr., Santa Fe, NM		6. State Oil & Ga	s Lease No.
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.)			7. Lease Name or Unit Agreement Name Skelly Penrose B Unit	
1. Type of Well: Oil Well Gas Well OtherWJW			8. Well Number 17	
2. Name of Operator Celero Energy, L P			9. OGRID Number 230164	
3. Address of Operator 400 W Illinois, Suite 1300 Midland, TX 79701			10. Pool name or Wildcat Langlie Mattix 7 Rvrs Qn Grbg	
4. Well Location				
Unit Letter D : 660' feet from the North line and 660' feet from the West line				
Section 4 Township 23S Range 37E NMPM CountyLea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3351'GL				
Pit or Below-grade Tank Application				
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water Pit Liner Thickness: mil Below-Grade Tank: Volume bbls: Construction Material				
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: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI		P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	Г ЈОВ	
OTHER:			nessed - Bradenhead	
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.				
10/25/04 - RU Key Well Service. Install BOP, POOH with tubing and packer.				
10/26/04 - RIH testing 2-3/8" tubing to 3500 psi. Set packer @ 3493', flanged up well head. Test to 580 psi, pressure bled off to 560 psi, held ok, test witnessed by OCD representative Buddy Hill. Return well to injection.				
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I hereby certify that the information grade tank has been/will be constructed or	above is true and complete to closed according to NMOCD guide	the best of my knowledge lines □, a general permit □	e and belief. I furthe or an (attached) alterna	r certify that any pit or below- ative OCD-approved plan .
SIGNATURE Jami 4	Duber TITT	E Regulatory Analyst		DATE 11/02/2004
Type or print name Tami Wilber For State Use Only DEC 0 6 200				
For State Use Only	L. L. Market	D REPRESENTATIVE II	STAFF NO.	DEC 0 6 200
APPROVED BY:	June TITI			_DATE
Conditions of Approval (if any):		•		

