| Submit To Appropriate District Office Two Copies District I 1625 N. French Dr. Hobbs NM 88240 | | | | BES | State of New Mexico Energy, Minerals and Natural Resources | | | | | | Form C-105 July 17, 2008 | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------|------------|-----------|--------------------------------|-------------|------------------------------------------------------------|----------------------------|--------------------------------|-----------|----------------------------------------|-----------------------------------|--------------------------|----------------------------------------------|-----------------------------|---------|---------------|--------------------------------------------|---------------|---------------|--|--|
| 1301 W. Grand Avenue, Artesia, NM 88210 | | | | | Oil Conservation Division | | | | | | - | 1. WELL API NO. 30-005-29184 | | | | | | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 2 2011 | | | | | | 1220 South St. Francis Dr. | | | | | | 2. Type of Lease X STATE ☐ FEE ☐ FED/INDIAN | | | | | | | | |
| District IV 1220 S St Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505 | | | | | | | | | | 3. State Oil & | | | | , | | | | | | |
| | | LET | ION C |)RVR | RECC | MPL | ETION RE | PO | RT A | ΝE | LOG | | نافاهی طن | | | | | i (este a | | |
| 4. Reason for fili | - | | | | | | | | | | | | 5. Lease Nam Rock Que | | | ement N | ame | | | |
| COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) | | | | | | | | | | Ī | 6. Well Number: | | | | | | | | | |
| #33; attach this at 7. Type of Comp | nd the pla | | | | | | | | | | | or | 315 | | | | | | | |
| X NEW | WELL [| □ wo | ORKOVE | R 🗆 | DEEPE | NING | □PLUGBACk | | DIFFE | REN | NT RESERV | OIR | | | | | | | | |
| 8. Name of Opera | ator Ce | elero | Energy | v II. L | .P | | | | | | | | 9. OGRID 247128 | | | | | | | |
| 10 Address of O | perator | | | | | | | | | 11. Pool name or Wildcat | | | | | | | | | | |
| 400 W. Illino | is, Ste. | 160 | 11 Midla | and, ` | TX 7 | 9701 | | | | | | Caprock; Queen | | | | | | | | |
| 12.Location | Unit Ltr | r Section | | | Township | | Range | | Lot | | Feet from the | | N/S Line | Feet | Feet from the | | Line | County | | |
| Surface: | Η . | | 26 | | 13S | | 31E | | | 2140 | | | N 660 | |) | E | | Chaves | | |
| BH: | | | | | , | | | | ······································ | | | | | | | | | | | |
| 13. Date Spudded 09/28/2011 | 10/0 | 03/20 | | ed | 10/ | | 10 | | | . Date Completed (Re 0/14/2011 | | | | RT, GR | | Elevations (DF and RKB, GR, etc.) 4411' GR | | | | |
| 18. Total Measure 3125' | | | | | 19. Plug Back Measured Depth | | | | 20. Was Directional Yes | | | onal | | | | Type Electric and Other Logs Run /CCL/CNL | | | | |
| 22. Producing Int. 3048-3062' | erval(s), | of this | complet | ion - T | op, Bot | tom, Na | me | | | | | | | | | | | | | |
| 23. | | · | | | | | ING REC | OR | D (R | | | ing | | | | | | | | |
| CASING SIZ 8 5/8" | ZE | 24# | WEIGHT £ | LB./F | .B./FT. DEPTH SET 376' | | | | HOLE SIZE | | | | CEMENTING RECORD 270 sx | | | 83 sx | | | | |
| 5 1/2" | | 15. | | | | 3125 | | | 7 7/8 | 11 | | | 700 sx | | 178 | | | | | |
| | | | | | 0.20 | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| 24. | | | | | | LINIE | R RECORD | | | | | 25 | | מכווזי | VC DEC | CORD | | · · · · · · - | | |
| SIZE | ТОР | | | | | | | | | 25. REEN SIZ | | | | NG REC | | PACK | ER SET | | | |
| | | | | | | | | | | | | 2 3/ | /8" | 30 | 32' | | 3032' | | | |
| 26. Perforation | record (i | nterva | ıl, size, ar | l Id num | ber) | | 27 ACID SHOT FE | | | | FRA | FRACTURE, CEMENT, SQUEEZE, ETC. | | | | | | | | |
| 3048-3062' (2 SPF) | | | | | DEPTH INTERVAL | | | | | INTERVAL | | AMOUNT AND KIND MATERIAL USED | | | | | | | | |
| ı | | | | | 30 | | | | 3048 | 3048-3062' | | | 1500 gals of 7.5% NEFE acid | | | | | | | |
| | | | | | | | | | - | | | | | | | | | | | |
| 28. | | | | | | | | PR | ODU | \mathbf{C} | ΓΙΟΝ | | | | | • | | | | |
| Date First Produc | tion | | Pr | oductio | on Meti | od (Flo | wing, gas lift, pı | _ | | | | | Well Status | (Proc | d. or Shu | t-in) | | | | |
| | | | | | | | | | | | | Water injection | | | | | | | | |
| Date of Test Hours Tested | | I I | | | Prod'n For Oil - Test Period | | Oil - | - Bbl Gas | | s - MCF W | | Water - Bbl. | | Gas - C | Oil Ratio | | | | | |
| , , | | 1 | Calculated 24- Oi Hour Rate | | Oil - Bbl. | | Gas - MCI | | - MCF | v | Water - Bbl. | | Oil Gravity - API - (Corr) | | r) | | | | | |
| 29. Disposition of Gas (Sold, used for fuel, vented, etc.) This is a CO2/water injection well 30. Test Witnessed By | | | | | | | | | | | | | | | | | | | | |
| 31. List Attachme | | | - | | | Z, C1 | 04, log | | | | | | | | | | | | | |
| 32. If a temporary | pit was | used a | t the well | , attaci | h a plat | with the | location of the | temp | orary pi | t. | | | | | | | | | | |
| 33. If an on-site b | urial was | used | at the we | ll, repo | ort the e | xact loca | ntion of the on-s | ite bi | ırial: | | | | | | | | | | | |
| 77 1 | C | , . | <u> </u> | | | | Latitude | <u> </u> | | | | | Longitude | | | | NA | D 1927 1983 | | |
| I hereby certif | y that t | ne in, | jormati | op sh | own o | n both ♪ P | <i>sides of this</i> rinted | forn | n is tri | ie c | | | | | | dge an | | | | |
| Signature / | 7 L | نما | 4 | en | 1 | / i | rinted Name Lisa H | luni | t | | Title | _e R | Regulatory A | \nal | yst | | Date | 11/30/201 | | |
| E-mail Addres | ss lhunt | (@ce | leroene | rgy.co | om | | | | | | (Z | . | • • | | | | . | | | |
| | | | | | | | | | | V | • | | | | | | _DEC_ | 0 7 2011 | | |

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

| Sc | outheaster | n New Mexico | Northwestern New Mexico | | | | |
|---------------------|------------|------------------|-------------------------|------------------|--|--|--|
| T. Anhy | | T. Canyon | T. Ojo Alamo | T. Penn A" | | | |
| T. Salt | | T. Strawn | T. Kirtland | T. Penn. "B" | | | |
| B. Salt | | T. Atoka | T. Fruitland | T. Penn. "C" | | | |
| T. Yates | 2298' | T. Miss | T. Pictured Cliffs | T. Penn. "D" | | | |
| T. 7 Rivers | 2410' | T. Devonian | T. Cliff House | T. Leadville | | | |
| T. Queen_ | 3048' | T. Silurian | T. Menefee | T. Madison | | | |
| T. Grayburg | | T. Montoya | T. Point Lookout_ | T. Elbert | | | |
| T. San Andres | | T. Simpson | T. Mancos | T. McCracken_ | | | |
| T. Glorieta | | T. McKee | T. Gallup | T. Ignacio Otzte | | | |
| T. Paddock | | T. Ellenburger | Base Greenhorn_ | T.Granite | | | |
| T. Blinebry | | T. Gr. Wash | T. Dakota | | | | |
| T.Tubb | | T. Delaware Sand | T. Morrison | | | | |
| T. Drinkard | | T. Bone Springs | T.Todilto | | | | |
| T. Abo | | T. | T. Entrada | | | | |
| T. Wolfcamp | | T. | T. Wingate | | | | |
| T. Penn | | Т | T. Chinle | | | | |
| T. Cisco (Bough C)_ | | Т | T. Permian | | | | |
| | | | | OIL OR GAS | | | |

| | | | | OR ZONE |
|-------------------------------|----------------------------|---------------------------------|-----------------------------------------|---------|
| No. 1, from | to | No. 3, from | to | |
| | | No. 4, from | | |
| | | TANT WATER SANDS | | |
| Include data on rate of water | inflow and elevation to wh | nich water rose in hole. | | |
| No. 1, from | to | feet | • • • • • • • • • • • • • • • • • • • • | |
| No. 2, from | to | feet | • • • • • • • • • • • • • • • • • • • • | |
| | | feet | | |
| | | ORD (Attach additional sheet if | | |

Thioknood

| From | То | Thickness In Feet | Lithology | From | То | Thickness In Feet | Lithology |
|------|----|----------------------|-----------|------|----|-------------------|-----------|
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