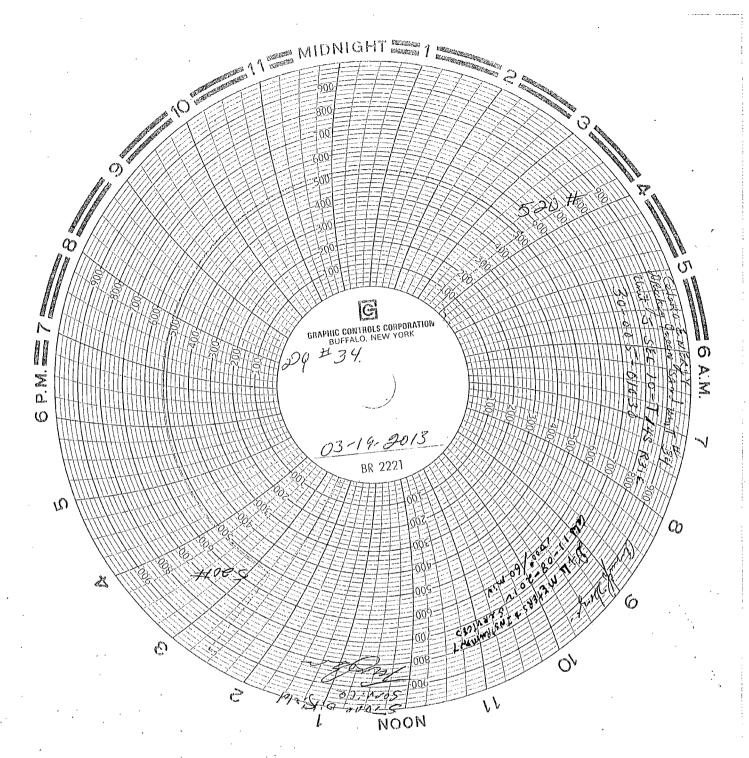
## HOBBS OCD

APPROVED BY

Conditions of Approval (if any)

Submit 1 Copy To Appropriate District APR Greegy, Minerals and Natural Resources Form C-103 Office Revised August 1, 2011 District I - (575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-005-01030 District II - (575) 748-1283 CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease 220 South St. Francis Dr. District III - (505) 334-6178 STATE | FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 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 Drickey Queen Sand Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well; Oil Well Gas Well Other Injection 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 J : 1980 feet from the S line and 1980 feet from the E Section 10 Township 14S Range 31E **NMPM** County Chaves 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 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 ALTERING CASING REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS.□ P AND A П PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB П DOWNHOLE COMMINGLE  $\Box$ OTHER: OTHER: MIT 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. 3/19/13 - Ran MIT for UIC. Tested to 520#. Final 520#. Tested for 30 mins. Copy of chart is attached. Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Regulatory Analyst DATE 04/01/2013 Type or print name Lisa Hunt E-mail address: lhunt@celeroenergy.com PHONE: (432)686-1883 For State Use Only

APR 08 2013



W