| Submit I Copy To Appropriate District Office  | State of New Me                      |                        | Form C-1   |                         |
|---|--------------------------------------|------------------------|--|-------------------------|
| District I – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240  District II – (575) 748-1283 811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr |                                      |                        | Revised August 1,20 WELL API NO.   | )]]                     |
|   |                                      |                        | 30-005-00832   |                         |
|   |                                      |                        | 5. Indicate Type of Lease STATE X FEE  |                         |
| 1000 Rio Brazos Rd., Aztec, NM 87410.<br>District IV – (505) 476-3460 DEC 0 9 2013 1220 S. St. Francis Dr., Santa Fe, NM  |                                      |                        | 6. State Oil & Gas Lease No.   |                         |
| 87505   |                                      |                        |  |                         |
| SUNDRY NOTECTES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  |                                      |                        | 7. Lease Name or Unit Agreement Name   | 3                       |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)   |                                      | Rock Queen Unit        |  |                         |
| 1. Type of Well: Oil Well Gas Well Other Injection  |                                      | 8. Well Number 13      |  |                         |
| 2. Name of Operator Celero Energy II, LP  |                                      |                        | 9. OGRID Number 247128   |                         |
| 3. Address of Operator <sub>400</sub> W. Illinois, Ste. 1601  |                                      |                        | 10. Pool name or Wildcat   |                         |
| Midland, TX 79701  4. Well Location   |                                      |                        | Caprock; Queen   | _/                      |
| *   | 660 feet from the N                  | line and 1980          | ) feet from the W lir  | ne /                    |
| Section 23 Township 13S Range 31E NMPM County Chaves  |                                      |                        |  |                         |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |                                      |                        |  |                         |
| 18-2-7-12-2-13-13-13-13-13-13-13-13-13-13-13-13-13-   | 3                                    |                        | The second secon | 160 ZZ                  |
| 12. Check   | Appropriate Box to Indicate N        | ature of Notice,       | Report or Other Data   |                         |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:   |                                      |                        |  |                         |
| PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WOR   |                                      |                        |  | $\supseteq$             |
| TEMPORARILY ABANDON   |                                      |                        | <del></del>  |                         |
| DOWNHOLE COMMINGLE  | MOETIFEE COMPE                       | CASING/CEIVIEN         |  |                         |
| OTHER:  | П                                    | OTHER: MIT             |  | $\overline{\mathbf{X}}$ |
| 13. Describe proposed or comp   |                                      | pertinent details, and | d give pertinent dates, including estimated  |                         |
| of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.   |                                      |                        |  |                         |
| 12/3/13 - Ran MIT. Pressure to 510#. Held for 30 min. MIT was witnessed & approved by Maxey Brown w/OCD. Copy of chart is   |                                      |                        |  |                         |
| attached. We would like to extend TA status.  |                                      |                        |  |                         |
|   |                                      |                        |  |                         |
|   |                                      |                        |  |                         |
|   |                                      |                        |  |                         |
|   |                                      | · .                    |  |                         |
|   | ·                                    | his Approval o         | f Temporary  |                         |
|   |                                      |                        | xpires <u>12-03-2014</u>   |                         |
| e.  |                                      | <u> </u>               | other,   |                         |
| Spud Date:  | Rig Release Da                       | nte:                   | and the second s |                         |
| •   |                                      |                        |  |                         |
| Lheraby certify that the information  | above is true and complete to the be | at of my linewilede    | and haliaf   |                         |
| Thereby certify that the information  | doove is true and complete to the be | est of my knowledge    | e and benefi.  |                         |
| SIGNATURE SIGNATURE   | TITLE Regula                         | tory Analyst           | DATE 12/04/2013  |                         |
| Type or print name Lisa Hunt E-mail address: lhunt@celeroener   |                                      |                        |  |                         |
| For State Use Only  |                                      | . ~                    |  | 7                       |
| APPROVED BY: Mal Whiteles TITLE Compliance Officer DATE 12/10/2013  Conditions of Approval (if any):  DEC 1 0 2013  |                                      |                        |  |                         |
| Conditions of Approval (if any):  |                                      |                        | DEC 1 0 2013   | 1                       |
|   |                                      |                        | î.a  | A                       |

