New Mexico OH Conservation Division, District a

1627 N. French Drive

Form 3160-5 (April 2004)

**UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Mebbs, NIVI 88240

FORM APPROVED

O	MB No 1004-0137 pires: March 31, 200
5. Lease Serial No	),

## CHANDON MOTICES AND DEDODTS ON WELLS

8910066920

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.			6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.  1. Type of Well Control of the state		7. If Unit or CA/Agreement, Name and/or No. 8910066920		
2. Name of Operator CELERO ENERGY II, LP			8. Well Name and No. Rock Queen Sand Unit # 53	
Ba. Address	3b. Phone No. (include area code) 432-686-1883		9. API Well No. 30-005-00864  10. Field and Pool, or Exploratory Area Caprock Oueen	
Sec. 25 (C); T13S; R31E 660' FNL & 1980' FWL	1., K., M., or Survey Description			11. County or Parish, State Chaves County, NM
12. CHECK A	PPROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOTICE, RI	EPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION			
Notice of Intent  Subsequent Report  Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Star Reclamation Recomplete Temporarily Abs	Well Integrity Other
If the proposal is to deepen dire Attach the Bond under which the following completion of the inv	ectionally or recomplete horizontally the work will be performed or proving colved operations. If the operation and Abandonment Notices shall be	y, give subsurface location de the Bond No. on file w results in a multiple compl	is and measured and true ith BLM/BIA. Require etion or recompletion in nents, including reclama	y proposed work and approximate duration thereof. e vertical depths of all pertinent markers and zones. d subsequent reports shall be filed within 30 days a new interval, a Form 3160-4 shall be filed once ation, have been completed, and the operator has
1 MIDII Wall Comrise Dir			5	

- 1. MIRU Well Service Rig
- 2. TOOH w/ rods, pump & production tbg
- 3. Verify casing integrity
- 4. Clean out well to TD & deepen 35' to fully evaluate Queen Sand
- 5. Run GR/CCL/CN Log
- 6. TIH w/ production equipment
- 7. Return well to production

MEGENED

FEB - 7 2008

HOBBS OCD

Conditions	ot A	ppro	<u>oval:</u>

OCD requires the Operator to complete a 24 hours production test and submit on form C-104 Request for Allowable before producting this well. Accompanied by Subsequent report on C-103with dates and what was done, along with tubing size and depth

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)  Haylie Ur:45	Title Operation	ons Tech	
Signature Suyholhius	Date	01/31/2008	
THIS SPACE FOR FEDERA	LOD STATE	E OFFICE LISE	**************************************

Approved Conditions of approval rifting, are affachen 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.

Office

Title

Accepted For Record Only! Approval

Title 18 U.S.C. Section 1903 and The 43 U.S. Section 1212, make it.a crime for any person knowing States any false, first truly or translation safety for representations as to any matter within its juri States any Jalse, fictitions for

Subject To Returning Well To Continuous Production And Keeping Well On Continuous Production Or Plugging Well With An Approved Plugging Program!

(Instructions on page 2)

