Submit 3 Copies To Appropriate District Office State of New	·· ·· · · · · · · · · · · · · · · · ·	Form C-103
<u>District I</u> Energy, Minerals and N	Natural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		WELL API NO
		5. Indicate Type of Lease
		STATE FEE
		6. State Oil & Gas Lease No. 303375
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Rock Queen Unit
1. Type of Well: Oil Well Gas Well Other		8. Well Number 90 —
2. Name of Operator Celero Energy II, LP		9. OGRID Number 247128
3. Address of Operator		10. Pool name or Wildcat
400 W. Illinois, Ste 1601, Midland, TX 79701		Caprock Queen /
4. Well Location Unit Letter K : 1980 feet from the	South line and	1980 feet from the West line
Section 36 Township 138		
11. Elevation (Show whether) NIM W O (MCS County
4382' GR		
Pit or Below-grade Tank Application or Closure		
		ance from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
12. Check Appropriate Box to Indicat	e 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		
PULL OR ALTER CASING MULTIPLE COMPL	CASING/CEMENT	「JOB □
OTHER: Re-Activate producer	OTHER:	П
13. Describe proposed or completed operations. (Clearly state		d 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.		•
1. MIRU Well Service Rig		
2. TOOH w/ production equipment 3. Verify casing integrity 4. Clean out well & deepen well 40' to fully evaluate the Queen sand interval		
5. TIH w/ production equipment		FEB - 5 2008 HOBBS OCD
6. Return well to production		LER - 2 too.
Conditions of Approval:		LIADES OCU
OCD requires the Operator to complete a 24 hours production test		HODDO
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		
I hereby certify that the information above is true and complete to th	e hest of my knowledge	and belief. I further cortify that any nit or below
grade tank has been/will be constructed or glosed according to NMOCD guidelin	es [], a general permit []	or an (attached) alternative OCD-approved plan .
SIGNATURE In the Min TITLE	Outside T. 1	72 4 7772 4 190 19000
SIGNATURE THE	Operations Tecl	DATE1/29/2008
Type or print name <u>Haylie Urias</u> E-mail address: <u>huria</u> For State Use Only	s@celeroenergy.com	Telephone No. 432-686-1883 Ext. 120
ADDROVED DV		
APPROVED BY:TITLE Conditions of Approval (if any):	Geologist	DANAR 2 8 2008