| Submit 3 Copies To Appropriate District Office   | State of New Mexico   |                        | Form C-103                                |
|--|---|------------------------|---|
| District I<br>1625 N. French Dr., Hobbs, NM 88240  | Energy, Minerals and Natural Resources                            |                        | May 27, 2004<br>WELL API NO.              |
| District II  | OU CONCEDIATION DIVICION  |                        | 30-005-00879                              |
| 1301 W. Grand Ave., Artesia, NM 88210<br>District III  | OIL CONSERVATION DIVISION<br>1220 South St. Francis Dr.           |                        | 5. Indicate Type of Lease                 |
| 1000 Rio Brazos Rd., Aztec, NM 87410   | Santa Fe, NM 87505  |                        | STATE X FEE  6. State Oil & Gas Lease No. |
| <u>District IV</u><br>1220 S. St. Francis Dr., Santa Fe, NM  | Santa 1 6, 1 11 1 0 7 5 0 5                                       |                        | o. State Off & Gas Lease No.              |
| 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  |   |                        | ROCK QUEEN UNIT                           |
| PROPOSALS.)  1. Type of Well: Oil Well   | Type of Well: Oil Well Gas Well Otherconvert injector to producer |                        | 8. Well Number 45                         |
| 2. Name of Operator CELERO ENERGY II, LP   |   | 9. OGRID Number 247128 |   |
| 3. Address of Operator 400 W. Illinois, Ste 1601<br>Midland, TX 79701  |   |                        | 10. Pool name or Wildcat CAPROCK QUEEN    |
| 4. Well Location   |   |                        |   |
| Unit Letter K: 1980' feet from the SOUTH line and 1980' feet from the WEST line  |   |                        |   |
| Section 26 Township 13S Range 31E NMPM CountyCHAVES  |   |                        |   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |   |                        |   |
| 4406' DG  Pit or Below-grade Tank Application or Closure   |   |                        |   |
| Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water   |   |                        |   |
| Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material  |   |                        |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |   |                        |   |
| 12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data   |   |                        |   |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |   |                        |   |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☒ COMMENCE DRILLING OPNS.☐ P AND A ☐   |   |                        |   |
| PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB  |   |                        |   |
|  |   |                        |   |
| OTHER:convert injector to producer  OTHER: OTHER:  OTH |   |                        |   |
| of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.   |   |                        |   |
| MIRU Well Service Rig  |   |                        |   |
| TOOH w/ injection equipment  |   |                        |   |
| Verify casing integrity Clean out well to TD & deepen to 3090' to fully evaluate Queen Sand  |   |                        |   |
| Run GR/CCL/CN logs   |   |                        |   |
| Run CBL from the casing shoe @ 3006' to 2400' TIH w/ production equipment and place well on production.  JUN n 2 2008  |   |                        | JUN n a znna                              |
| 1111 w/ production equipment and place wen on production.  |   |                        |   |
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|  |   |                        |   |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-  |   |                        |   |
| grade tank has been/will be constructed or closed according to NMOCD guidelines, a general permit or an (attached) alternative OCD-approved plan   |   |                        |   |
| SIGNATURE TITLE Operations Tech DATE 05/30/2008  |   |                        |   |
| Type or print name Haylie Urias For State Use Only   | E-mail address: hurias@celero                                     |                        | penergy.com Telephone No. (432)686-1883   |
| APPROVED BY: Mis Illiam OCIDEPTENCT SUPERVISOR/GENERAL MANAGER DATE JUN 2 7 2008   |   |                        |   |

Conditions of Approval (if any):