Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			WELL API NO.		
District II	OIL CONGERNATION DIVIGION			WELLAIT	30-005-01103	3
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.				Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				TE 🔯 FEE 🛭	1
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Saina 1 C, 14141 67303			6. State Oil 303737	& Gas Lease No.	
87505 SUNDRY NOTICES AND REPORTS ON WELLS					ma on Unit A one on an	+ 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.)				7. Lease Name or Unit Agreement Name WEST CAP QUEEN SAND		
1. Type of Well: Oil Well X Gas Well Other				8. Well Number 13		
2. Name of Operator CELERO ENERGY II, LP				9. OGRID N	Number 247128	
3. Address of Operator 400 W. Illinois, Ste 1601				10. Pool name or Wildcat		
Midland, 1X /9/01				CAPROCK QUEEN		
4. Well Location	((0)	NT.				
· · · · · · · · · · · · · · · · · · ·	feet from the		line and660		et from the E	line
Section 20	Township 14S 11. Elevation (Show whee		nge 31E	NMPM	CountyCHAV	ES
	2	ther DA,				
Pit or Below-grade Tank Application C						
l .	aterDistance from near					ļ
Pit Liner Thickness: mil	Below-Grade Tank: Volu	me	bbls; Con	struction Mater	ial	
12. Check A	Appropriate Box to Ind	icate N	ature of Notice, F	Report or O	ther Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK			REMEDIAL WORK		☐ ALTERING CAS	SING 🗌
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRIL	LING OPNS.[P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	JOB [<u> </u>	
OTHER:Reactivate producer		X	OTHER:			m
13. Describe proposed or comp	leted operations. (Clearly s	state all p	ertinent details, and	give pertinen	t dates, including estir	nated date
of starting any proposed we or recompletion.	ork). SEE RULE 1103. For	r Multipl	e Completions: Atta	ach wellbore	liagram of proposed c	ompletion
MIRU Well Service Rig						
TOOH w/ rods, pump & production	1 tbg					
Verify casing integrity Clean out well to TD & deepen app	orov 20' to fully evaluate O	naan gon	d interval			
Run Gr/CCL/CN Log	TOX. 20 TO TUTTY EVALUATE Q	uccii san	d interval			
TIH w/ production equipment					REMER	
Return well to production				AC	LEWEV	•
				,ال	JF U 8 5009	
				LIM	DOCAN	
				TUE		
I hereby certify that the information	above is true and complete	to the be	st of my knowledge	and belief. If	further certify that any pi	f or below-
grade tank has been/will be constructed or	closed according to NMOCD gui	idelines [, a general permit 📋 o	r an (attached) a	lternative OCD-approved	i plan □.
SIGNATURE Jaylo	Mias_TI	TLEOpe	rations Tech		DATE_07/07/20	08
Type or print name Haylie Urias	F	-mail add	lress:hurias@celeroe	energy com	Telephone No. (432))686 ₋ 1992
For State Use Only				(1010phone 140. (432)	1000-1003
ADDD OVED DV.	1/1/1/2 OC	DISTRIC	T SUPERVISOR/GE	NERAL MAN	Aren	5 000
APPROVED BY: Mus (Conditions of Approval (if any):	runns II	TLE			DATE	<u> 5 2</u> 008
* · · · · · · · · · · · · · · · · · · ·						