

Submit 3 Copies To Appropriate District Office
District I
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (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.)		WELL API NO. 30-025-00301 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>INJECTOR</u>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>CELERO ENERGY II, LP</u>		6. State Oil & Gas Lease No. 303735
3. Address of Operator 400 W. Illinois, Ste 1601 Midland, TX 79701		7. Lease Name or Unit Agreement Name ROCK QUEEN UNIT ✓
4. Well Location Unit Letter <u>H</u> : 1980' feet from the <u>N</u> line and <u>660'</u> feet from the <u>E</u> line Section <u>30</u> Township <u>13S</u> Range <u>32E</u> NMPM County <u>LEA</u>		8. Well Number <u>8</u> ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>247128</u> ✓
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat CAPROCK QUEEN ✓
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

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: Reactivate injector ☒

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and 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.

MIRU Well Service Rig
TOOH w/ injection tbg
Verify casing integrity
Clean out well to TD & deepen approx. 20' to fully evaluate Queen Sand interval
Run GR/CCL/CN Log
Run mechanical integrity test
TIH w/ injection equipment
Return well to injection

RECEIVED

JUL 09 2008

HOBBS OCD

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 Haylie Urias

TITLE Operations Tech

DATE 07/07/2008

Type or print name Haylie Urias
For State Use Only

E-mail address: hurias@celeroenergy.com

Telephone No. (432)686-1883

APPROVED BY: Chris Williams

OCD DISTRICT SUPERVISOR/GENERAL MANAGER

TITLE

DATE

Conditions of Approval (if any):

JUL 15 2008