| Submit 3 Copies To Appropriate District Office  | State of New Mexico                      |                          | Form C-103                  |
|---|--|--------------------------|-----------------------------|
| District l  | Energy, Minerals and Natural Resources   |                          | June 19, 2008               |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II<br>1301 W. Grand Ave., Artesia, NM 88270  OPT CONSERVATION DIVISION  |  | WELL AP                  | 30-005-00929                |
| 1301 W. Grand Ave., Artesia, NM 88210 CONSERVATION DIVISION   |  |                          | Type of Lease               |
| District III 1000 Rio Brazos Rd. Aziec NM 87MAY (1 to 2513).  |  |                          | TE X FEE \(  \)             |
|   |  |                          | l & Gas Lease No.           |
| 1220 S. St. Francis Dr., Santa Fe OBBSOCD 87505   |  |                          | /                           |
| SUNDRY NOTICES AND REPORTS ON WELLS   |  |                          | ame 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.)   |  |                          | n Unit                      |
| 1. Type of Well: Oil Well Gas Well Other Injector   |  |                          | ımber 97 /                  |
| 2. Name of Operator CELERO ENERGY II, LP  |  |                          | Number 247128 /             |
| 3. Address of Operator 400 W. Illinois, Ste. 1601<br>Midland, TX 79701  |  |                          | ame or Wildcat              |
| 4. Well Location  |  |                          | ueen ,                      |
|   | feet from the North                      | line and 660 f           | eet from the West line      |
| Section 35  | Township 13S Range                       |                          | County Chaves               |
| The second of th  | 11. Elevation (Show whether DR, RKB      |                          | County Chaves               |
| 4420' KB  |  |                          |                             |
|   |  |                          | ·· <del>·</del>             |
| 12. Check Appropriate Box to Indicate 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 ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐   |  |                          | S.□ PANDA □                 |
| PULL OR ALTER CASING  |  |                          |                             |
| DOWNHOLE COMMINGLE  |  |                          |                             |
| OTHER:  | ОТІ                                      | HER:                     |                             |
| 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.  |  |                          |                             |
| 1) POOH w/ tubing/packer  |  |                          |                             |
| Make scraper run     Run casing inspection log  |  |                          |                             |
| 4) Run packer/test casing   |  |                          |                             |
| 5) Set Composit BP  |  |                          |                             |
| 6) Run 4" casing and cement to surface  |  |                          |                             |
| 7) Drill out and run injection tubing/packer  |  |                          |                             |
|   |  |                          |                             |
|   | •  |                          |                             |
|   |  |                          |                             |
|   |  |                          |                             |
|   |  |                          |                             |
| Spud Date:  | Rig Release Date:                        |                          |                             |
|   | ,  |                          |                             |
| I hereby certify that the information al  | bove is true and complete to the best of | my knowledge and belief  |                             |
| Thereby certify that the information as   | /  | my knowledge and belief. |                             |
| $\mathcal{L}_{\mathcal{L}}}}}}}}}}$ |  |                          |                             |
| SIGNATURE O Wa Trul TITLE Regulatory Analyst  |  |                          | DATE <u>05/05/2009</u>      |
| Type or print name Lisa Hunt  | E-mail address: TP                       | lunt@celeroenergy.com    | PHONE: <u>(432)686-1883</u> |
| For State Use Only  |  | ruma, coror concrey, com | 1110112. 1432/000-1003      |
| 0.001   | OSTRIC                                   | T 1 SUPERVISOR           | N/AV = 7 2000               |
| APPROVED BY: Conditions of Approval (if any):   | TITLE DISTRIO                            |                          | DATEWAY 1 1 2009            |