

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> July 17, 2008
		1. WELL API NO. 30-025-07145
		2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN
		3. State Oil & Gas Lease No.
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>		
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)		5. Lease Name or Unit Agreement Name <b>Continental Wallace</b>
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> OTHER <b>Convert to SWD</b>		6. Well Number:  <b>1</b>
8. Name of Operator <b>CELERO ENERGY II, LP</b>		9. OGRID <b>247128</b>
10. Address of Operator <b>400 W. Illinois, Ste. 1601 Midland, TX 79701</b>		11. Pool name or Wildcat <b>SWD; Devonian</b> <span style="float: right;"><i>&lt;96101&gt;</i></span>
12. Location	Unit Ltr	Section
Surface:	N	6
BH:		
13. Date Spudded <b>03/14/1957</b>	14. Date T.D. Reached	15. Date Rig Released
16. Date Completed (Ready to Produce) <b>2/24/10 SWD</b>	17. Elevations (DF and RKB, RT, GR, etc.) <b>3875' GR</b>	
18. Total Measured Depth of Well <b>12041'</b>	19. Plug Back Measured Depth	20. Was Directional Survey Made?
22. Producing Interval(s), of this completion - Top, Bottom, Name		21. Type Electric and Other Logs Run <b>GR/CCL/CBL</b>
<b>23. CASING RECORD (Report all strings set in well)</b>		
CASING SIZE	WEIGHT LB./FT.	DEPTH SET
13-3/8"	54.5	325'
8-5/8"	32	4460'
5-1/2"	17/20	12041'
24. LINER RECORD		
SIZE	TOP	BOTTOM
25. TUBING RECORD		
SIZE	DEPTH SET	PACKER SET
3-1/2"	11958'	11958'
26. Perforation record (interval, size, and number) <b>12023'-12041'</b>		
27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.		
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	
	<b>5000 gals 15% NEFE acid</b>	
<b>28. PRODUCTION</b>		
Date First Production	Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> )	
	<b>Injecting</b>	
Date of Test	Hours Tested	Choke Size
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> )		30. Test Witnessed By
31. List Attachments <b>Already sent the following: C-103, C-144EZ, MIT chart &amp; CBL</b>		
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.		
33. If an on-site burial was used at the well, report the exact location of the on-site burial:		
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief		
Signature <i>Lisa Hunt</i>	Printed Name <b>Lisa Hunt</b>	Title <b>Regulatory Analyst</b>
E-mail Address <b>LHunt@celeroenergy.com</b>	Date <b>03/10/2010</b>	

New Well PDD # 2836991

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinbry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2. from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology