

RECEIVED

JUL 13 2010

HOBSOCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.	30-005-00934 ✓
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
6. State Oil & Gas Lease No.	891006920
7. Lease Name or Unit Agreement Name	Rock Queen Unit ✓
8. Well Number	93 /
9. OGRID Number	247128 /
10. Pool name or Wildcat	Caprock; Queen ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other Injection ✓

2. Name of Operator CELERO ENERGY II, LP ✓

3. Address of Operator 400 W. Illinois, Ste. 1601
Midland, TX 79701

4. Well Location

Unit Letter N : 660 feet from the South line and 1980 feet from the West line
Section 36 Township 13S Range 31E NMPM County Chaves ✓

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 ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: ☐OTHER: Annual IMIT ☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well failed the annual IMIT on 5/27/10. A copy of the OCD Letter of Violation is attached.

7/6 & 7/7/10 - MIRU. Lower tbg to neutral weight. Pulled 15 pts of tension on pkr. Ran MIT. Tested to 480# for 30 mins w/no pressure lost. Witnessed by Maxie Brown w/OCD. Original chart attached & sent to OCD Hobbs.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

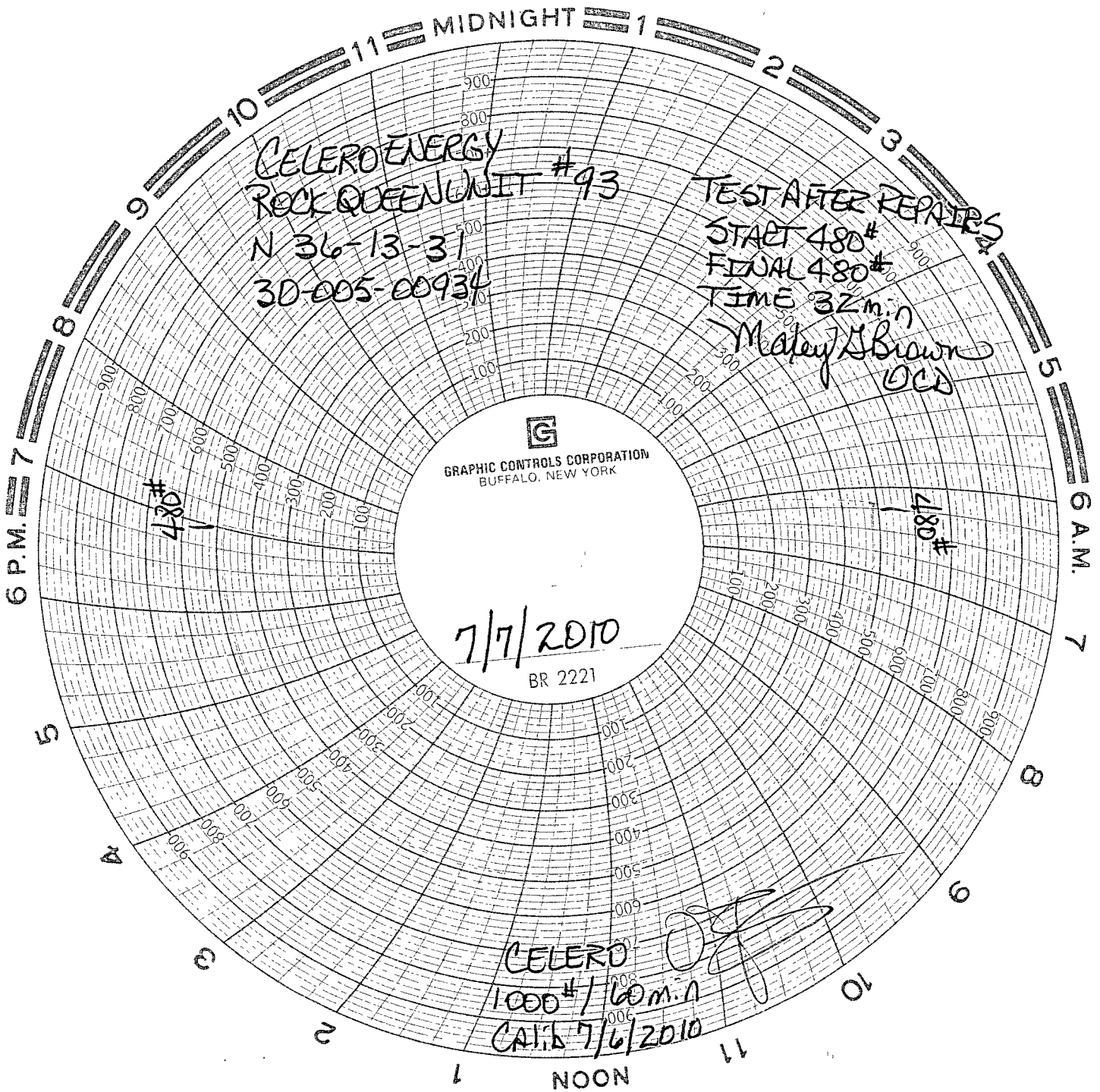
SIGNATURE Lisa Hunt TITLE Regulatory Analyst DATE 07/12/2010Type or print name Lisa Hunt E-mail address: LHunt@celeroenergy.com PHONE: (432)686-1883

For State Use Only

APPROVED BY: [Signature] TITLE STAFF MGR DATE 7-14-10

Conditions of Approval (if any):

7.00



CELERO ENERGY
ROCK QUEEN UNIT #93
N 36-13-31
30-005-00934

TEST AFTER REPAIRS
START 480#
FINAL 480#
TIME 32 min
Materly/Brown
OCD


GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

7/7/2010
BR 2221

CELERO
1000# / 60 min
CALIB 7/6/2010