

State of New Mexico  
Energy, Minerals and Natural Resources**RECEIVED****AUG 23 2010****HOBBSOCD**

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-005-00825 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
6. State Oil & Gas Lease No. 303735
7. Lease Name or Unit Agreement Name Rock Queen Unit ✓
8. Well Number 21 ✓
9. OGRID Number 247128 ✓
10. Pool name or Wildcat Caprock Queen ✓

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> ✓	
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 <u>M</u> : 660 feet from the <u>S</u> line and 660 feet from the <u>W</u> line Section <u>23</u> Township <u>13S</u> Range <u>31E</u> NMPM County <u>Chaves</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc) 4429'	

## 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: ☐

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.

Requesting 6 month TA status pending CO2 project approval.

POOH &amp; lay down all production equipment.

RIH &amp; check PBTD.

RIH w/pkr to check casing integrity.

If casing tests to adequate depth, set plug &amp; circulate well w/pkr fluid.

Notify OCD Hobbs office 24 hrs prior to perform required MIT for 30 mins.

Condition of Approval: Notify OCD Hobbs  
office 24 hours prior to running MIT Test & Chart

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 08/23/2010Type 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 8-23-10

Conditions of Approval (if any):

# CELERO ENERGY

FIELD: Caprock  
LEASE/UNIT: Rock Queen  
COUNTY: Chaves

DATE: Nov. 30, 2007  
BY: GSA  
WELL: 21  
STATE: New Mexico

Location: 660' FSL & 660' FWL, Sec 23M, T13S, R31ECM  
SPUD: 6/55 COMP: 6/55  
CURRENT STATUS: Producer  
Original Well Name: Chaves State BM #2

KB = 4429'  
GL =  
API = 30-005-00825

