Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I 1625 N. French Dr., Hobbs, NM 88240	ergy, Minerals and Natural Resolution	October 13, 2009 WILL APLINO.
District II	IL CONSERVATION DIVISION 0	30-025-05145
1301 W. Grand Aver Avresta, NM 88210 District III	1220 South St. Francis Dr.	STATE FEE X
1000 Rio Brazos Robbes SW 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505 HOBBS	Gante Oil & Gas Lease No.
87505	D DEDORTS ON WELLS	7. Lease Name or Unit Agreement Name
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		T D Pope 26
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other		8. Well Number 10
2. Name of Operator Celero Energy II, LP		9. OGRID Number 247128
3. Address of Operator 400 W. Illinois, Ste. 1601 Midland, TX 79701		10. Pool name or Wildcat  Denton; Devonian
4. Well Location		
Unit Letter P: 660 feet from the South line and 660 feet from the East line		
Section 26	Township 14S Range 37E	NMPM CountyLea
	evation (Show whether DR, RKB, RT, GR, etc., 5' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENT	ION TO: SUB	SEQUENT REPORT OF:
	AND ABANDON   REMEDIAL WOR	
TEMPORARILY ABANDON		
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
OTHER: Return to production (h Per +3 🛛 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.		
1 POOH w/production equipment & catch pkr.		
2. Spot sand & gravel plug to 12530'. Spot Class H Cmt plus additives from 12530-12480'.		
3 Test csg & repair any csg leaks found.		
<ol> <li>Run GR/CCL/CNL &amp; perf the Devonian formation selectively from 12050-12460'.</li> <li>Acidize w/ 15000 gals inhibited 15% HCL.</li> </ol>		
6. RIH w/ production equipment & place on production.		
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Spud Date:	Rig Release Date:	·
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
Thereby certify that the information above is	true and complete to the best of my knowledg	50 mile bonon
SIGNATURE LUA HU	TITLE Regulatory Analyst	DATE 02/28/2011
Time or mint name I is Hunt	E-mail address: lhunt@celeroen	ergy.com PHONE: (432)686-1883
Type or print name Lisa Hunt  For State Use Only		ALCOHOL IN THE STATE OF THE STA
APPROVED BY:  Conditions of Approval (if any):	TITLE PETROLEIM ENG	DATE MAR 0 1 2011
conditions of raphrosas (is any).		

Cost

