

Submit 3 Copies To Appropriate District
Office
District I
1625 N French Dr , Hobbs, NM 88240
District II
1301 W Grand Ave , Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S St Francis Dr , Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

JUL - 6 2009

Form C-103
June 30, 2009

RM

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)		WELL API NO. 30-015-30238
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Forest Oil Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 707 17 th Street, Suite 3600, Denver, Colorado		7. Lease Name or Unit Agreement Name Barclay Federal
4. Well Location Unit Letter: <u>J</u> <u>1980'</u> from the <u>South</u> line and <u>1980'</u> from the <u>East</u> line Section <u>12</u> Township <u>23S</u> Range <u>31E</u> NMPM County <u>Eddy</u>		8. Well Number #17
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3505' GR		9. OGRID Number 8041
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

ROD REPAIR
6-9/10-2009

Drove to location. Pick up pmp & RBIH w/rods, replace 1 - 7/8 rid & shear tool 26 - Km NU WH, hang well load tbg w/31 bbls, pres to 500 psi hold good, good pmp action, RD PU clean loc left unit running. Drove rig to yard.

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

I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE

Kelly Harris

TITLE Regulatory Tech

DATE

6-30-09

Type or print name

Kelly Harris

E-mail address: kdharris@forestoil.com

Telephone No. 303-812-1676

For State Use Only

APPROVED BY:

Asqu

TITLE

Geologist

DATE

7/6/09

Conditions of Approval (if any):