| Submit 3 Copies To Appropriate District Office  | State of New Mexico  |                     | Form C-103   |
|---|--|---------------------|--|
| District I  | Energy, Minerals and Natur   | WELL API NO.        |  |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II  | OH CONCEDIATION DWW.   |                     | 30-015-05418   |
| 1301 W. Grand Ave., Artesia, NM 88210   | OIL CONSERVATION DIVISION  |                     | 5. Indicate Type of Lease  |
| <u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410   | 1220 South St. Francis Dr.   |                     | STATE FEE  |
| District IV   | Santa Fe, NM 87505   |                     | 6. State Oil & Gas Lease No.   |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  |  |                     |  |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A                         |  |                     | 7. Lease Name or Unit Agreement Name   |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SOCH   |  |                     | Skelly Unit  8. Well Number  |
| PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other Injection Month - Year  |  |                     | 83   |
| 2. Name of Operator   | Gas well Other Injection   | Month - Year        | 9. OGRID Number  |
| Forest Oil Corporation  | (  | MAR 1 3 2007        | 8041   |
| 3. Address of Operator  |  | OGD - ARTESIA, NIM  | 10. Pool name or Wildcat   |
| 3504 NW County Road   |  |                     | Grayburg Jackson 7-Rivers QN GB SA   |
| 4. Well Location  |  |                     |  |
| Unit Letter <u>D</u> : <u>660</u> f   | eet from the North line and 66   | feet from the       | <u>West</u> line   |
| Section 26  | Township 17S Rang  |                     | NMPM Eddy County   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |                     |  |
| 3840° DF  Pit or Below-grade Tank Application  or Closure   |  |                     |  |
|   |  |                     |  |
|   |  |                     |  |
|   |  |                     |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |  |                     |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:   |  |                     |  |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐  |  |                     |  |
| TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING C  |  |                     | _LING OPNS.□ P AND A □   |
| PULL OR ALTER CASING  | MULTIPLE COMPL   | CASING/CEMENT       | JOB  |
| OTHER:  |  | OTHER: Tempor       | ary Abandon  |
| 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.  |  |                     |  |
|   |  |                     |  |
|   |  |                     |  |
| 8/02/06 MIRU unit.  |  |                     |  |
| 8/03/06 ND WH. Release pkr. POH w/2-3/8" tbg. RU WL. Set 5.5 CIBP & test. RIH w/tbg. Circulate pkr. fluid. POH.                         |  |                     |  |
| LD tbg. SIW. 8/04/06 ND BOP. NU WH. Pressured to 500 psi. RD unit.  |  |                     |  |
| 12/14/06 Set 5.5 CIBP @ 3220'.  |  |                     |  |
| 2/20/07 Ran MIT for 30 min. to 520 psi. Held ok. Test performed by Mr. Rueda w/Stone Oilfield Service. Witnessed by Gerry               |  |                     |  |
| Guye w/NMOCD. Original chart retained by Gerry Guye. Copy of chart attached. Well is TA'D.  |  |                     |  |
|   |  | famma               | .m. Abandonos Clatus Approved  |
|   |  | lempo               | rary Abandoned StatusApproved  |
| * This is a Federal injector. Subr  | nitted to BLM on Form 3160-5. 3/1/   | /2007 <b>Until</b>  | 2-20-10  |
| •   |  | -                   |  |
|   |  | 6 1 11              | 11 11 6 20 20 20 20 20 20 20 20 20 20 20 20 20   |
| grade tank has been/will be constructed or  | above is true and complete to the be<br>closed according to NMOCD guidelines F | St of my knowledge  | e and belief. I further certify that any pit or below-<br>or an (attached) alternative OCD-approved plan |
|   |  |                     |  |
| SIGNATURE 11 Jany On Turny  | TITLE Pr   | oduction Analyst    | DATE <u>March 12, 2007</u>   |
| Type or print name Mary Jo Turner   | r E mail addrage, miturn   | er@forestoil.com    | Telephone No. (505) 392-9797   |
| For State Use Only  |  | CI WIDIESIOII.COIII | 1 diephone 140. (202) 372-7171   |
| - Caret   | 4  | Gerry G             | Guye 4 0007  |
| ATTROVED DT.  | TITLE_   | Deputy Field        |  |
| Conditions of Approval (if any):  | /  | District ti -       | Artesia  |