| Submit 3 Copies To Appropriate District Office   | State of Energy, Mineral               | f New Me               |                      | AUG 272009   | Form C-103      |
|--|--|------------------------|----------------------|--|-----------------|
| District I<br>1625 N French Dr., Hobbs, NM 88240<br>District II  | <b>50</b> /                            |                        |                      | WELL API NO.<br>30-015-29312   |                 |
| 1301 W Grand Ave, Artesia, NM 88210  |  |                        |                      | 5. Indicate Type of Lea  | se              |
| District III<br>1000 Rio Brazos Rd, Aztec, NM 87410  | 1220 South St. Francis Dr.             |                        |                      | STATE  | FEE             |
| District IV<br>1220 S St. Francis Dr., Santa Fe, NM  | Santa Fe, NIVI 87503                   |                        |                      | 6. State Oil & Gas Leas  | se No.          |
| 87505  | TICEC AND DEPORTS                      | NIWELLO                |                      | 7. Lease Name or Unit  | A arramant Nama |
| 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 |  |                        |                      | Skelly Unit  | Agreement Name  |
| PROPOSALS.)  1. Type of Well: Oil Well ☑ Gas Well ☐ Other  |  |                        |                      | 8. Well Number<br>191  |                 |
| 2. Name of Operator Forest Oil Corporation   |  |                        |                      | 9. OGRID Number<br>8041  |                 |
| 3. Address of Operator   |  |                        |                      | 10. Pool name or Wildo   | cat             |
| 707 17 <sup>th</sup> Street, Suite 3600, Denver, Colorado 80202  |  |                        |                      | Grayburg Jackson 7   | -Rivers         |
| 4. Well Location   | 0.5.41                                 | G1                     | 1' 1 1               | 415) 6 4 5   | en x            |
|  |  |                        | line andl NMPM       | from the <u>F</u> County Eddy  | EL line         |
| Section 15 Tov   | wnship 17S Rai                         | nge 31E<br>whether DR, |                      | County Eddy  |                 |
| Pit or Below-grade Tank Application  | ### ### ### ### ### #### ############# | 3876'                  |                      | in the state of th |                 |
|  |  | earest fresh w         | ater well Dist       | ance from nearest surface wat  | er              |
| Pit Liner Thickness: mi  | · · ·                                  |                        |                      | nstruction Material  |                 |
| 12. Check  | Appropriate Box to I                   | ndicate Na             | ature of Notice,     | Report or Other Data   |                 |
| NOTICE OF I  | NTENTION TO:                           | İ                      | SUB                  | SEQUENT REPOR  | T OF:           |
| PERFORM REMEDIAL WORK  |  | N 🗆                    | REMEDIAL WORK        |  | RING CASING     |
|  |  |                        |                      | LLING OPNS. P AN   | DA 🗆            |
| PULL OR ALTER CASING   | MULTIPLE COMPL                         |                        | CASING/CEMENT        | JOB 🗌  |                 |
| OTHER:   |  |                        | OTHER:               |  |                 |
| 13. Describe proposed or com of starting any proposed w or recompletion.   |  |                        |                      |  |                 |
| 8-21-2009  |  |                        |                      |  |                 |
| Well sign with required information  | n has been placed at locat             | ion. Jennife           | r Van Curen has be   | en notified for an inspect   | ion.            |
|  |  |                        |                      |  |                 |
|  |  |                        |                      |  |                 |
|  |  |                        |                      |  |                 |
|  |  |                        |                      |  |                 |
|  |  |                        |                      |  |                 |
|  |  |                        |                      |  |                 |
| I handay coutify that the information  | s above is two and some                | ata ta tha ha          | at of my lenovilodos | and haliaf   |                 |
| I hereby certify that the information I further certify that any pit or below-gra  | de tank has been/will be cons          |                        |                      |  | rmit 🗌 or an    |
| (attached)alternative  | e OCD-approved plan [].                |                        |                      |  |                 |
| [/ 00 1/   | 24.11.1                                |                        |                      |  |                 |
| SIGNATURE HILLS  | MVW                                    | TITLE R                | egulatory Tech       | DATE 8-24-200  | 9               |
| Type or print name Kelly Harri   | is E-mail a                            | ddress: kdha           | rris@forestoil.com   | Telephone No.  | 303-812-1676    |
| For State Use Only APPROVED BY:  |  | TITLE                  | Calarin              | - 547  |                 |
| Conditions of Approval (if any)  | eju -                                  | _11116                 | Supular              | DAT  | 1-4/4W          |