

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM22080 ✓
2. Name of Operator FOREST OIL CORPORATION		6. If Indian, Allottee or Tribe Name
Contact: CINDY A BUSH E-Mail: cabush@forestoil.com		7. If Unit or CA/Agreement, Name and/or No. BARCLAY FEDERAL ✓
3a. Address 707 17TH STREET SUITE 3600 DENVER, CO 80202	3b. Phone No. (include area code) Ph: 303-812-1554 Fx: 303-864-6105	8. Well Name and No. BARCLAY FEDERAL 10
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T23S R31E 1980FSL 1980FWL		9. API Well No. 30-015-30239 ✓
		10. Field and Pool, or Exploratory LIVINGSTON RIDGE DELAWARE
		11. County or Parish, and State EDDY COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

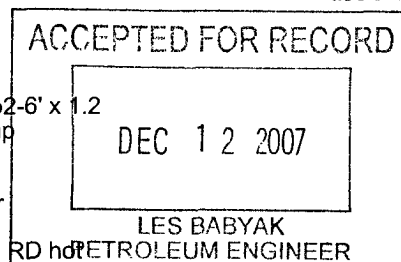
TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

**Pump Repair**

12-3-07 RUPU unhung unit head, bleed down well L.D.P.R. unseat pmp POH rods & pmp 2-6' x 1.2 subs, 126-1.2, 118-1", 10 K bars 1.5, 4' x 1", shear tool 1" 8", 4' x 1", 4' x 7/8 w/rod guide pmp 2-1/2 x 1-3/4" x 24', pmp supply brought rebuilt pump, needed 4' x 1" sub didn't have one.

12-4-07 Pick up pmp 2-1/2 x 12-1/2 x 24', G.A. 1-1/4 x 12', 1" x 4" w/rod guide, 4'x1' shear tool 26-K, 4'x 1", 10 K bars 1-1/4, 118-1" 126-1.2, 2-6' x 1.2. PR 24' x 1-1/2, hang unit head, space pmp, RU ot oiler, load tbg w/30 bbls wtr press to 500# hold good w/good pmp action, oiler RD PU Clean location.



14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #57494 verified by the BLM Well Information System  
For FOREST OIL CORPORATION, sent to the Carlsbad**

Name (Printed/Typed) CINDY A BUSH	Title SR. REGULATORY TECH
Signature (Electronic Submission)	Date 12/10/2007

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

Accepted for record - NMOC

12/18/07