Submit 3 Copies To Appropriate District Office District I	State of Energy, Minerals	New Me and Natu		WELL ARING	Form C-103 June 19, 2008	KM
1625 N. French Dr , Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave , Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd , Aztec, NM 87410 <u>District IV</u>	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505			WELL API NO. 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.		
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR USE "APPLIPROPOSALS) 1. Type of Well: Oil Well 2. Name of Operator Forest Oil Corporation 3. Address of Operator 707 17 th Street Suite 3600 Den 4. Well Location Unit Letter :	ICES AND REPORTS OF SALS TO DRILL OR TO DEE CATION FOR PERMIT" (FOR Gas Well Other Ver Colorado 80202	N WELLS PEN OR PLU MREC NOV	DG BACK TO A SELVED 1 6 2009 D ARTESIA line and	7. Lease Name or Unit A FOC State B – NMNM 12 8. Well Number #10, # 9. OGRID Number 8041 10. Pool name or Wildcat Grayburg Jackson; SR-Q-	greement Name 20721, 22 & 23 411, #12 t SA	-
Section 16	Township 17S 11. Elevation (Show w	Range hether DR,		NMPM County	Eddy	
	Appropriate Box to Ir ITENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL		SUE REMEDIAL WOR	ILLING OPNS P AND	ING CASING 🔲	
OTHER:			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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. FOC B STATE # 10 API #30-015-36254 AGREEMENT #NMNM 120721 FOC B STATE # 11 API #30-015-36255 AGREEMENT #NMNM 120722 FOC B STATE # 12 API #30-015-36256 AGREEMENT #NMNM 120723 Forest Oil Corporation respectfully requests approval to begin construction operations on the placement of equipment as previously submitted on the facilities for these agreements. All new and existing production equipment will be subject to onsite inspection prior to restoration of production.						
Spud Date:		Release Dat				_
SIGNATURE Type or print name For State Use Only APPROVED BY: Conditions of Approval (if any):	MWW TITE	LE POL Ke ail address:	Matory	Tell_datell-	10-09 038121676 11910004	o