

Submit 3 Copies To Appropriate 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

RECEIVED State of New Mexico
 Energy, Minerals and Natural Resources
FEB 06 2009
HOBSOCD OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 May 27, 2004

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) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>		WELL API NO. 30-025-32424 /
2. Name of Operator Forest Oil Corporation /		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 707 17 th Street, Suite 3600, Denver, Colorado		6. State Oil & Gas Lease No. B-2148
4. Well Location Unit Letter: <u>O</u> feet from <u>20</u> line and <u>South</u> feet and <u>1385</u> from the <u>East</u> line Section <u>17</u> Township <u>17S</u> Range <u>33E</u> NMPM County <u>Lea</u>		7. Lease Name or Unit Agreement Name Caprock Maljamar Unit /
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4182' GR		8. Well Number 167 /
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 _____		9. OGRID Number 8041 /
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input 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: rod Repair <input checked="" type="checkbox"/>

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.

12-15-08 - Move rig to loc, spot rig, started to rig up had trouble w/ rig, finally got bit to work, unhung unit head, pick up on rods, rods were unscrewed, screwed back on, unset pmp POH w/ 26' x 1 1/4 PR, w/ 12' x 1 1/2 PRL, 4', 6', x 7/8 subs, 51 - 7/8 rods, - 125 3/4 rods, - 10 - 1" rods, 2 1/2 x 1 3/4 x 20' pmp, 1 1/4 x 10' GA, .Pump arrived on loc, RBIH & check all rods tighten them up, hang unit head, space pmp good pmp action, RD PU clean loc, M.O.

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 Cindy Bush TITLE Sr-Regulatory Tech DATE 1-27-09

Type or print name Cindy Bush E-mail address: cabush@forestoil.com Telephone No. 303-812-1554

For State Use Only
 APPROVED BY: [Signature] TITLE **PETROLEUM ENGINEER** DATE **FEB 10 2009**