

OIL CONSERVATION DIVISION

Month - Year

MAR 29 2007

NMOC - ARTESIA, NM

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-015-05412

5. Indicate Type of Lease
STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Lea D

8. Well Number
2

9. OGRID Number
8041

10. Pool name or Wildcat
Grayburg Jackson 7-Rivers QN GB SA

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 ☐ Gas Well ☐ Other ☐ Injection

2. Name of Operator
Forest Oil Corporation

3. Address of Operator
3504 NW County Road Hobbs, New Mexico 88240 (505) 392-9797

4. Well Location

Unit Letter A : 710 feet from the North line and 660 feet from the East line

Section 26 Township 17S Range 31E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3855' DF

Pit or Below-grade Tank Application ☐ or Closure ☐

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 _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☒ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

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.

The annulus will be pressured to 500 PSI to check its integrity. If it is ok, a pulling unit will be rigged up. The packer will be released and pulled out of the hole, laying down tubing and packer. A CIBP will be set where the packer was set. The CIBP will be set within 100' of top perforations. The casing will be pressured to 500 PSI and tested again with a 30 minute chart.

The Artesia NMOCD office will be notified before start of work and casing test.
Estimated date of starting proposed work will be upon approval.

* This is a Federal injection well.

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 Mary Jo Turner TITLE Production Analyst DATE March 28, 2007

Type or print name Mary Jo Turner E-mail address: mjturner@forestoil.com Telephone No. (505) 392-9797

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APPROVED BY: Gerry Guye TITLE Deputy Field Inspector DATE APR 2 2007
Conditions of Approval (if any): District II - Artesia