

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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-05331
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Skelly Unit
8. Well Number 74
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

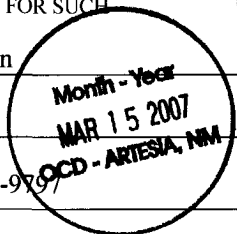
4. Well Location  
Unit Letter M : 530 feet from the South line and 330 feet from the West line  
Section 21 Township 17S Range 31E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3773' 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

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.

TA Status will be approved only upon receipt of Final C-103 and a witnessed MIT Test. Notify OCD 24 hours prior to testing.

\* 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 14, 2007

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

**For State Use Only**

APPROVED BY: Gerry Guye TITLE Deputy Field Inspector DATE MAR 15 2007  
Conditions of Approval (if any): District II - Artesia