

Submit 3 Copies To Appropriate District 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

State of New Mexico
Energy, Minerals and Natural Resources
RECEIVED
OIL CONSERVATION DIVISION
NOV - 9 2003
1220 South St. Francis Dr.
Santa Fe, NM 87505
OGD-ARTESIA

Form C-103
Revised May 08, 2003

WELL API NO. 30-015-05840
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name STATE AA-2
8. Well Number 1
9. OGRID Number
10. Pool name or Wildcat SWD: DELAWARE

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD	
2. Name of Operator FOREST OIL CORPORATION	
3. Address of Operator 1600 BROADWAY #2200 DENVER CO 80202	
4. Well Location Unit Letter A : 660 feet from the NORTH line and 660 feet from the EAST line Section 2 Township 23S Range 31E NMPM EDDY County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,459' GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND 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.

(TO CORRECT NOTICE OF VIOLATION DATED 09/15/03)

RU PU ON 10/01/03, RD PU ON 10/07/03

MIRU SLICKLINE RIG, SET PLUG IN PROFILE NIPPLE, RU PU, NDWH, NU BOP. UNSET ON/OFF TOOL, POOH W/3 1/2" FL-4"S" TBG. HAD UNSCREWED OFF OF ON/OFF TOOL CHANGE OVER. RIH FISH ON/OFF TOOL, RETRIEVED TOOL, RIH W/3 1/2" FL-4 "S" TBG, TESTING TO 2000#, CIRC PACKER FLUID, LATCHED ON TO PACKER, RU SLICKLINE RIG, FISHED PLUG OUT OF PROFILE NIPPLE. TEST CASING TO 500# FOR 30 MIN. PUT WELL ON INJECTION. RD PU.

TEST WITNESSED BY GERRY GUYE, STATE OF NEW MEXICO. (SEE ATTACHED CHART)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Peggy J. Gooss TITLE REGULATORY SPECIALIST DATE 10/27/03

Type or print name PEGGY J. GOSS Telephone No. (303) 812-1655

(This space for State use)

APPROVED BY [Signature] TITLE CO DATE 11-12-03
Conditions of approval, if any:

RECEIVED
NOV - 9 2003
OCD-ARTESIA

