

FEB -9 2009

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FEB 05 2009

HOBBSOCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

\$

WELL API NO.

30-015-29227

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

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 ☐

2. Name of Operator

Forest Oil Corporation

3. Address of Operator

707 17th Street, Suite 3600, Denver, Colorado 80202

4. Well Location

Unit Letter E : 2598 feet from the North line and 1279 feet from the West lineSection 28Township 17SRange 31E

NMPM

County Eddy

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

3767 GR

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: Rod Repair

☒

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.

12-19-08 - RU PU unhung unit head LD PR, RU vac. trk to tbq, POH rods to 7/8 body break 2 rods down, from top RU fish tool caught fish, unset pmp POH LD fish tool, replace 7/8 rod, RBIH, pick up PR hang well on, 2 stroke press to 500 psi, 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

TITLE

DATE

Type or print name

E-mail address:

Telephone No.

For State Use Only

Accepted for record

NMOCD

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):