

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

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

JUN 15 2009

Form C-103
June 9, 2009

Rm

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.)		WELL API NO. 30-015-29926
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐		5. Indicate Type of Lease STATE ☒ FEE ☐
2. Name of Operator Forest Oil Corporation		6. State Oil & Gas Lease No. 20761
3. Address of Operator 707 17 th Street, Suite 3600, Denver, Colorado		7. Lease Name or Unit Agreement Name Barclay State
4. Well Location Unit Letter: <u>I</u> <u>990'</u> from the <u>North</u> line and <u>470'</u> from the <u>East</u> line Section <u>2</u> Township <u>23S</u> Range <u>31E</u> NMPM County <u>Eddy</u>		8. Well Number 8
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3447' GR		9. OGRID Number 8041
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: Repair Wellhead ☒

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.

Repair Wellhead:

5/18/2009 – Caval pumping unit service move volta flex back.

5/19/2009 – PU RU ND stuffing box & double E BOP, replace both had bad threads NU WH RD PU M.O. Caval pumping service move Rolta flex forward & hang well, left unit running. 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 Kelly Harris TITLE Regulatory Tech DATE 6-11-09

Type or print name Kelly Harris E-mail address: kdharris@forestoil.com Telephone No. 303-812-1676

For State Use Only

APPROVED BY: [Signature] TITLE Geologist DATE 6/15/2009

Conditions of Approval (if any):