

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

Form C-103
June 19, 2008

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

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. 30-015-33654
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Forest Oil Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 707 17 th . Street, Suite 3600, Denver Colorado		7. Lease Name or Unit Agreement Name Barclay Federal
4. Well Location Unit Letter <u>F</u> 2000' feet from the North line and 2180' feet from the West line Section 12 Township 23S Range 31E NMPM County Eddy		8. Well Number 22
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3481' GR		9. OGRID Number 8041
		10. Pool name or Wildcat Livingston Ridge Delaware

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 ☐
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER ☐ Pit Closing

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.

Pit closed in June of 2005 per NMOC Rule 50.

Spud Date:

Rig Release Date:

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

SIGNATURE

Rick Rickman

TITLE HSE Specialist

DATE 9-23-09

Type or print name Rick Rickman

E-mail address: rdrickman@forestoil.com

PHONE: 575-369-6176

For State Use Only

APPROVED BY: Mike Spratkin
Conditions of Approval (if any):

TITLE Environmental Specialist
NMOC DIST II

DATE 9/23/09