

OCT 01 2009

RM

Submit 3 Copies To Appropriate District Office

State of New Mexico
Energy, Minerals and Natural ResourcesForm C-103
June 19, 2008

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

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. 30-015-29792
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 checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Forest Oil Corporation		6. State Oil & Gas Lease No.
3. Address of Operator 707 17th Street, Suite 3600 Denver, CO 80202		7. Lease Name or Unit Agreement Name Barclay State
4. Well Location Unit Letter <u>0</u> : <u>660</u> feet from the <u>South</u> line and <u>1980</u> feet 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 <u>4</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3431		9. OGRID Number 8041
		10. Pool name or Wildcat Livingston Ridge

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: Possible Tubing Leak ☒

SUBSEQUENT REPORT OF:

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

OTHER ☐

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.

We have a possible tubing leak for this well so we are asking permission to miru, pull tubing, replace as needed and to return well to active swd status.

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

Kelly Harris

TITLE

Regulatory Tech.

DATE

9-28-09

Type or print name

Kelly Harris

E-mail address:

Kdharris@Forestoil.com

PHONE:

303 812 1676

For State Use Only

APPROVED BY:

[Signature]

TITLE

Geologist

DATE

11/1/2009

Conditions of Approval (if any):