Submit 3 Copies To Appropriate District	Stat	te of New Me	xico		Form C	C-103 <i>D</i>	
Office District 1 Energy, Minerals and Natural Reso				WELL API NO	June 19		
1625 N French Dr., Hobbs, NM 88240  District II  1301 W Grand Ave. Artesia NM 88210  OIL CONSERVATIO			DIVISION	30-015-05327			
District III 1220 South St. Francis				5. Indicate Typ	be of Lease  FEE		
1000 Rio Brazos Rd, Aztec, NM 87410 District IV 1220 S. St. Francis Dr, Santa Fe, NM				6. State Oil &			
87505							
SUNDRY NOTICES AND REPORTS ON WEL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101 PROPOSALS)				Skelly Unit	or Unit Agreement N	ame	
1. Type of Well: Oil Well Gas Well C		er RECEI	VED		8. Well Number 7		
2. Name of Operator Forest Oil Corporation				l e	9. OGRID Number 8041		
3. Address of Operator		NOV 1 8 2009		10. Pool name	10. Pool name or Wildcat		
707 17 <sup>th</sup> Street Suite 3600 Denver, CO 80202		NMOCD ARTESIA		Grayburg Jacks	Grayburg Jackson 7-Rivers QN GB SA		
4. Well Location Unit Letter E:	L 1874 feet fro	om theNor		d 766 feet f	rom the West	line	
	18741eet 110 wnship 17S	Ran		NMPM	County Eddy	-11116	
A CONTRACT OF THE PROPERTY OF	11. Elevation (She		J				
	3740'						
12. Check A	ppropriate Box	to Indicate N	ature of Not	ice, Report or Oth	er Data		
	• • •		1	•			
NOTICE OF INTENTION TO: SUBS				SUBSEQUENT R WORK	ALTERING CASIN	G □	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE				DRILLING OPNS.	P AND A		
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMP	PL 🔲	CASING/CEI	MENT JOB			
_							
OTHER Make repairs & return well to Production ⊠			OTHER:				
13. Describe proposed or compl of starting any proposed wor or recompletion.							
Forest Oil Corporation respereturn well to production. T				pair the hole in the tub	ing, install a new pum	p and	
Spud Date:		Rig Release Da	te:	,			
	J					<del></del>	
I hereby certify that the information a	bove is true and co	omplete to the be	st of my know	rledge and belief.			
SIGNATURE HUNDAHAI	MM	TITLE RO	Mulaton	stech.	DATE 11-16-0	9	
SIGNATURE ( ) (W)	V - VC	<del> , -</del>		dfarestail com			
Type or print name For State Use Only	wris	E-mail address	:		PHONE: <b>303812 (</b> 4	676	
APPROVED BY:  Conditions of Approval (if any)	July 2	TITLE (	Goologis	, 	PATE 11/19/09		