| Submit 3 Copies To Appropriate District   | State of New Mex  |   | Form C-103   |  |  |  |  |  |
|---|---|---|--|--|--|--|--|--|
| District I  | The English and Natural Resources   |   | May 27, 2004   |  |  |  |  |  |
|   | 625 N. French Dr , Hobbs, NM 88240  |   | WELL API NO.<br>30-025-33628   |  |  |  |  |  |
| 1301 W. Grand Ave. Artesia NM 88210   | District II 1301 W. Grand Ave. Artesia NM 88210 OIL CONSERVATION DIVISION |   |  |  |  |  |  |  |
| District III  | strict III # 41990aSouth St. Francis Dr.                                  |   | 5. Indicate Type of Lease  STATE FEE FEE   |  |  |  |  |  |
| 1000 RIO BIAZOS Ru , AZICC, NIVI 67410  | Santa Fe, NM 87   | 505                                     | 6. State Oil & Gas Lease No.   |  |  |  |  |  |
| District IV 1220 S. St Francis Dr., Santa Fe, N   |   | o. State on & das Lease No.             |  |  |  |  |  |  |
| 87505 SUNDRY NOTICE   |   | 7. Lease Name or Unit Agreement Name    |  |  |  |  |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A                 |   |   | Maljamar Grayburg Unit   |  |  |  |  |  |
| DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  |   |   | 8. Well Number   |  |  |  |  |  |
| PROPOSALS.)  1. Type of Well: Oil Well G  |   | 154                                     |  |  |  |  |  |  |
| 1. Type of Well: Oil Well Gail Carlo Gail Gail Gail Gail Gail Gail Gail Gail  | 9. OGRID Number /   |   |  |  |  |  |  |  |
| Forest Oil Corporation  |   | 8041                                    |  |  |  |  |  |  |
| 3. Address of Operator  |   | 10. Pool name or Wildcat                |  |  |  |  |  |  |
| 707 17 <sup>th</sup> Street, Suite 3600, Denver, C  |   | Maljamar Grayburg San Andres            |  |  |  |  |  |  |
| 4. Well Location  |   |   |  |  |  |  |  |  |
| 1   | om the 1980 line and  | South feet and                          | 990 from the West line   |  |  |  |  |  |
|   | Township 17S Range  |   | APM County Lea   |  |  |  |  |  |
|   | 11. Elevation (Show whether DR,   |   |  |  |  |  |  |  |
|   |   |   |  |  |  |  |  |  |
| Pit or Below-grade Tank Application  or C   |   |   |  |  |  |  |  |  |
| Pit typeDepth to Groundwate   | rDistance from nearest fresh w  | ater well Dista                         | ance from nearest surface water  |  |  |  |  |  |
| Pit Liner Thickness: mil  | Below-Grade Tank: Volume  | bbls; Cor                               | nstruction Material  |  |  |  |  |  |
| 12. Check Ap  | propriate Box to Indicate Na  | ature of Notice, l                      | Report or Other Data   |  |  |  |  |  |
| NOTICE OF INT   | ENTION TO:  | SUBS                                    | SEQUENT REPORT OF:   |  |  |  |  |  |
| NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASE                                     |   |   |  |  |  |  |  |  |
| <del>_</del>  | CHANGE PLANS  |   |  |  |  |  |  |  |
|   | MULTIPLE COMPL  | CASING/CEMENT JOB                       |  |  |  |  |  |  |
| TOLE ON METER ON OHITO  |   | O/IOING/OLINEIT/ TOD                    |  |  |  |  |  |  |
| OTHER:  |   | OTHER: MIT                              | Test & Return to Active Injection  |  |  |  |  |  |
| 13 Describe proposed or complet   | red operations (Clearly state all r                                       | Lertinent details, and                  | I give pertinent dates, including estimated date   |  |  |  |  |  |
|   |   |   | ach wellbore diagram of proposed completion  |  |  |  |  |  |
| or recompletion.  | y, obb Robb Trob, For Manuer  | o comproment in                         |  |  |  |  |  |  |
| 6-10-08 - move rig to location, RU F  | PU NU WH , unset perma latch  | n pkr,NU BOP, PO                        | OH tbg, RBIH 4 3/4 bit - 3 - 3 1/2 DC, tag   |  |  |  |  |  |
| @ 3843' w/ 117 jts POH 2 jts close  | well, back hoe dig work over  | pit, set reverse un                     | it fill w/ 100 bbls prod. Wtr.   |  |  |  |  |  |
|   |   |   |  |  |  |  |  |  |
| 6-11-08 - RU Knight reverse unit RIH tbg , tag @ 3843' clean out to 4142' fail out @ 4000' , circulate well clean, POH DC, RU   |   |   |  |  |  |  |  |  |
| tbg tester test tbg to 6000 # RD tbg  | g tester, POH LD work string, S   | SION                                    |  |  |  |  |  |  |
| 6-12-08 - Change over to 2 7/8 to 2 3/8 tbg , test tbg , 5000 PSI RIH 5 1/2 x 2 3/8 AD-1 pkr , 118 jts 2 3/8 IPC , change 2 bad |   |   |  |  |  |  |  |  |
| jts, bad plastic set pkr @ 3737' pres cgs to 500 # held good for 30 min., unset pkr, circulate 75 bbls w/ pkr fluid.            |   |   |  |  |  |  |  |  |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  | 350#  | , |  |  |  |  |  |  |
|   |   |   |  |  |  |  |  |  |
| MIT Chart attached  |   |   |  |  |  |  |  |  |
| Return to active injection.   |   |   |  |  |  |  |  |  |
|   |   |   |  |  |  |  |  |  |
|   |   |   | and belief. I further certify that any pit or below-<br>or an (attached) alternative OCD-approved plan |  |  |  |  |  |
| ( ' , ' +2  | 2   |   |  |  |  |  |  |  |
| SIGNATURE   | TITLE Sr.   | . Regulatory Tech                       | DATE 7-10-08   |  |  |  |  |  |
| Type or print name <u>Cindy Bush</u>  | E-mail address: cabush(   | @forestoil.com                          | Telephone No. 303-812-1554   |  |  |  |  |  |
| For State Use Only  |   |   | JUL 15 2008  |  |  |  |  |  |
| <u> </u>  | OC DE   | STEAT O IDEAL                           | 207 105008   |  |  |  |  |  |
| APPROVED BY: Mus U  | TILLE TITLE   | CI BULEKAISC                            | DR/GENERAL MANIDATTE   |  |  |  |  |  |
| Conditions of Approval (if any):  |   |   | ·  |  |  |  |  |  |

Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0135 Expires. July 31, 2010

Lease Serial No.

| SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.   |   |                                    |   |                                     | NMNM70988X  |                         |  |
|--|---|------------------------------------|---|-------------------------------------|---|-------------------------|--|
|  |   |                                    |   |                                     | 6 If Indian, Allottee or Tribe Name                           |                         |  |
| SUBMIT IN TRIPLICATE - Other instructions on reverse side.   |   |                                    |   |                                     | 7. If Unit or CA/Agreement, Name and/or No. MALJAMAR GRAYBURG |                         |  |
| Type of Well   |   |                                    |   |                                     | Well Name and No.     MALJAMAR GRAYBURG UNIT 154              |                         |  |
| 2. Name of Operator Contact: CINDY BUSH FOREST OIL CORPORATION E-Mail: cabush@forestoil.com  |   |                                    |   |                                     | 9. API Well No.<br>30-025-33628                               |                         |  |
| 3a Address<br>707 17TH STREET SUITE 3600 Ph: 303-8<br>DENVER, CO 80202   |   |                                    | include area cod<br>12-1554                 | e)                                  | 10. Field and Pool, or Exploratory MALJAMAR GRYABURG          |                         |  |
| 4. Location of Well (Footage, Sec., T  | 11. County or Parish, a   |                                    |   | and State                           |   |                         |  |
| Sec 4 T17S R32E 1980FSL 9  |   |                                    | LEA COUNTY, NM                              |                                     |   |                         |  |
| 12. CHECK APPI   | ROPRIATE BOX(ES) TO   | ) INDICATE                         | NATURE OF                                   | NOTICE, R                           | EPORT, OR OTHER   | R DATA                  |  |
| TYPE OF SUBMISSION   |   |                                    |   |                                     |   |                         |  |
| ☐ Notice of Intent   | ☐ Acidize   | Deepen □ Deepen                    |   | ☐ Product                           | ☐ Production (Start/Resume) ☐ Water Shut-Off                  |                         |  |
|  | ☐ Alter Casing  | ☐ Fracture Treat                   |   | □ Reclam                            | Reclamation Well  |                         |  |
| ☐ Subsequent Report  | ☐ Casing Repair   | ☐ Nev                              | v Construction                              | ☐ Recom                             | olete   | ☐ Other                 |  |
| ☐ Final Abandonment Notice   | ☐ Change Plans  |                                    | g and Abandon                               |                                     | arily Abandon   |                         |  |
|  | Convert to Injection  |                                    |   | ☐ Water I                           | Disposal proposed work and approximate duration thereof.      |                         |  |
| Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for fine for the following testing has been completed. Final At determined that the site is ready for fine for the following that the site is ready for fine for the following that the following the following the following that the following the follow | operations If the operation resonandonment Notices shall be file in all inspection.)  RU PU NU WH, unset p. | sults in a multiped only after all | e completion or re-<br>requirements, inclu  | completion in a siding reclamation. | new interval, a Form 3160, have been completed, a             | )-4 shall be filed once |  |
| 6-11-08 - RU Knight reverse unit RIH tbg, tag @ 3843' clean out to 4142' fail out @4000', circ well clean, POH DC, RU tbg tester t est tbg to 6000# RD tbg tester. POH LD work string.   |   |                                    |   |                                     |   |                         |  |
| 6-12-08 - Change over to 2 7/8   | -   |                                    | J   |                                     | <b>-1</b>   |                         |  |
|  |   |                                    |   |                                     |   |                         |  |
| 14 I hereby certify that the foregoing is true and correct.  Electronic Submission #61286 verified by the BLM Well Information System  For FOREST OIL CORPORATION, sent to the Hobbs   |   |                                    |   |                                     |   |                         |  |
| Name (Printed/Typed) CINDY BUSH  |   |                                    | Title SR. RE                                | Title SR. REGULATORY TECH           |   |                         |  |
|  |   |                                    |   |                                     |   |                         |  |
| Signature (Electronic S  |   |                                    | Date 07/08/2                                | ~ <del></del>                       | 79.71   |                         |  |
|  | THIS SPACE FO   | R FEDERA                           | L OR STATE                                  | OFFICE US                           | SE  |                         |  |
| Approved By  |   | Title                              |   |                                     | Date  |                         |  |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.  |   |                                    | Office                                      |                                     |   |                         |  |
| Fitle 18 U S.C. Section 1001 and Title 43 U States any false, fictitious or fraudulent st  | J.S.C. Section 1212, make it a catements or representations as t  | rime for any pe<br>o any matter wi | rson knowingly and<br>thin its jurisdiction | l willfully to ma                   | ke to any department or a                                     | gency of the United     |  |

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

## Additional data for EC transaction #61286 that would not fit on the form

## 32. Additional remarks, continued

pkr, 118 jts 2 3/8 IPC, change 2 bad plastic set pkr @3737' press csg to 500# held good for 30 mins, unset pkr, circ 75 bblspkr fluid set pkr tested GS w/a chart 540 PSI for 30 min. Ok pump down tbg 1/3 bpm @2300 PSI-430 bbls P/D, RD pmp truck, RD PU, clean location.

MIT Chart attached

Return to Active Injection

