

Submit 3 Copies To: Appropriate District
Office
District I
1625 N French Dr, Hobbs, NM 88240
District II
1301 W Grand Ave, Artesia, NM 88220
District III
1000 Rio Brazos Rd, Lordsburg, NM 87040
District IV
1220 S St. Francis Dr, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-01526 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Caprock Maljamar Unit ✓
8. Well Number 93 ✓
9. OGRID Number 8041 ✓
10. Pool name or Wildcat Maljamar GBR-SA ✓

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>	7. Lease Name or Unit Agreement Name Caprock Maljamar Unit ✓
2. Name of Operator Forest Oil Corporation ✓	8. Well Number 93 ✓
3. Address of Operator 707 17 th Street, Suite 3600, Denver, Colorado	9. OGRID Number 8041 ✓
4. Well Location Unit Letter: <u>L</u> <u>1980</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>West</u> line ✓ Section 28 Township 17S Range 33E NMPM County Lea	10. Pool name or Wildcat Maljamar GBR-SA ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4145' GR 4145' KB	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Casing Repair <input checked="" type="checkbox"/>	

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.

Casing Repair

9/12/2007 - Had to stop rig, off road due to heavy fog, when clear, started moving. When turning in to location, got rig stuck & broke drive shaft, had to drive back to shop to get parts. Repair rig & got rig unstuck, move rig to location.
RU PU ND rod hooks NU bells & elevators, change 2 - 7/8 slips to 2 - 3/8. SION.
9/13/08 - ND WH - had to call welder, weld ear on donut slips, heat well head to brake loose well head. Unseat AD-1 - 5 - 1/2 pkr.
NU BOP POH w/125 jts - 2 - 3/8 ipc tbq & tally. RU tbq tester, RBIH test tbq, replaced 1 - jt three jts down, twist off, thin wall. Set RBP@3900' & set arrow set pkr@3872', S.I. well SION.

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kelly Harris TITLE Regulatory Tech DATE 10-6-08

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

For State Use Only

APPROVED BY: Cary W. Hill TITLE OCD REED REPRESENTATIVE II/STAFF MANAGER DATE OCT 24 2008

Conditions of Approval (if any):