

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Forest Oil Corporation		8. Farm or Lease Name B Lee State
3. Address of Operator P. O. Box 1916, Midland, TX 79702		9. Well No. 8
4. Location of Well UNIT LETTER <u>A</u> <u>467</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>5</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> NMPM.		10. Field and Pool, or Wildcat Scharb-Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.) 3919.8' GL		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

8/28/85 Ran & set 12 jts 13-3/8", 48#, H-40, ST&C casing @ 475.97' in a 17-1/2" hole.
Cemented w/500 sx Class "C" + 3% CaCl₂ @ 14.8 PPG, 1.32 cu. ft./sk yield.
Circulated cmt to surface. WOC 16-1/4 hrs & test csg & cmt to 600 psi, OK.

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

SIGNED Donald L. Black TITLE DET. ENG. DATE 9/3/85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 25 1985

RECEIVED
OCT 23 1985
O.C.D.
HOBBS OFFICE