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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Bari Federal	
9. Well No. 4	
10. Field and Pool, or Wildcat Undesignated P/C	
12. County	

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Dyna Ray Oil and Gas Co., Inc. 3. Address of Operator 4101 E Louisiana, Denver, Colorado 80222 4. Location of Well UNIT LETTER EJ , 1850 FEET FROM THE South LINE AND 1500 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 23N RANGE 1W NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 7611-6 GL

16. 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 checked="" 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.
Remedial work was complete with no results. Request permission to plug and abandon well in the following manner:

50 sacks of cement across the perforations, pull casing, spot 50 sacks of cement in and out of stub of casing, fill hole with mud, place 25 sacks of cement at surface, erect well marker, restore any surface damage.



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

SIGNED [Signature] TITLE Manager of Lands DATE July 16, 1969
APPROVED BY [Signature] TITLE Sup Dist III DATE 7-22-69
CONDITIONS OF APPROVAL, IF ANY: