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Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

APR 2 0 2009

Bureau of Land Management Farmington Field Office FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

	, r			
1. Type of Well: Gas		5. Lease Number:	5. Lease Number: SF-078125	
		<del>-</del>		
2. Name of Operator: BURLINGTON RESOURCES OIL & GAS COMPANY LP		6. If Indian, allottee	6. If Indian, allottee or Tribe Name:	
3. Address and Phone No. of Opera	etor:	7. Unit Agreement N	lame:	
P. O. Box 4289, Farmington, NM 87499		8. Well Name and N	8. Well Name and Number:	
(505) 326-9700			SUNRAY A 1	
4. Location of Well, Footage, Sec. T, R, U:		- Q API Wall No	9. API Well No.	
FOOTAGE: 992' FNL & 998' FEL			3004509540	
S: 15 T: 030N R: 010W U: A				
		10. Field and Pool:	MEGAVEDDE	
		MV - BLANCO: PC - BLANCO:	:MESAVERDE :PICTURED CLIFFS	
		11. County and Stat	e:	
		SAN JUAN, NI	М	
12. CHECK APPROPRIATE BOX TO	INDICATE NATURE OF NOTICE	CE, REPORT, OTHER DATA		
Notice of Intent	Recompletion	n Change	of Plans	
X Subsequent Report	Plugging Baci	k New Cor	nstruction	
Final Abandonment Casing Repair		r Non-Rou	Non-Routine Fracturing	
Abandonment	Altering Casin	ng Water Si	hut Off	
	X Other- Re-De	livery Conversi	ion to Injection	
13. Describe Proposed or Complete	ed Operations	-		
This well was re-delivered on 4/9/2009 and produced natural gas and entrained hydrocarbons.				
<b>TP</b> : 200	CP: 200 Initial M	<b>CF</b> : 358	OIL CONS. DIV.	
		,	DIST. 3	
Meter No.: 72679				
Gas Co.: EFS				
Proj Type.: REDELI	VERY	f Last -	prod 6/08)	
14. I Hereby certify that the foregoing	ng is true and correct.			
Signed Marie E. Jaramillo Title: Regulat		Regulatory Tech. Date:	4/16/2009	
This Space for Federal or State Office Us	<b>/</b> e)		ACCEPTED FOR RECORD	
APPROVED BY:	Title:	. Date:	APR 2 1 2009	
CONDITION OF APPROVAL, if any:  BY				