NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMIS	SION Effective 1-1-65
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Federal Fee
OPERATOR 1		5. State Oil & Gas Lease No.
SUNDRY (DO NOT USE THIS FORM FOR PROPIUSE **APPLICATION	NOTICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT REIN FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	SERVOIR.
I. OIL GAS WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator SUNRAY DX OIL COM	Pany	8. Farm or Lease Name  Central Bisti Unit
3. Address of Operator  101 University Bl	vd., Denver, Colorado 80206	9. Well No.
4. Location of Well		10. Field and Pool, or Wildcat
UNIT CETTER B	20 FEET FROM THE N LINE AND 183	D FEET FROM Bisti Lower Gallup
THE LINE, SECTION	9 TOWNSHIP 25N RANGE 12	NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
İ	6199' K.B.	San Juan
Check A	ppropriate Box To Indicate Nature of Notice, rention to:	Report or Other Data SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING C	DPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEM	ENT JOB
Demoi m Continu Ton	OTHER	
OTHER Repair Casing Lea	<u>nk</u> <u>XX</u>	
17. Describe Proposed or Completed Oper work) SEE RULE 1103.	rations (Clearly state all pertinent details, and give pertinent	dates, including estimated date of starting any proposed
bridge plug at approx area of corrosion. A pumped into the leak drilled out and the c pulled and the well r	dicates a casing leak in this well. Identicately 4500'. We will run a casing a squeeze retainer will be run and the to cover the area of bad casing. The casing tested to 1500 psi for 30 minumenturned to producing.	corrosion log to determine the e leak located. Cement will be a cement in the pipe will be tes. The bridge plug will be  [CENT]  JAN 15 1965  JAN 15 1965  OIL CON. COM. DIST. 3
18. I hereby certify that the information at	bove is true and complete to the best of my knowledge and be	dief.
SIGNED D. K. Hall		
	TITLE District Engi	neer DATE January 13, 1965
APPROVED BY UILLY CONDITIONS OF APPROVAL, IF ANY:	Lewer Supervisor Dist. # 3	neer DATE