

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1094-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM2748
2. Name of Operator BURNETT OIL COMPANY INC		6. If Indian, Allottee or Tribe Name
Contact: LESLIE GARVIS E-Mail: lgarvis@burnettoil.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 801 CHERRY STREET UNIT 9 FORT WORTH, TX 76102-6881	3b. Phone No. (include area code) Ph: 817-332-5108	8. Well Name and No. GISSLER B 109
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T17S R30E SESW.0330FSL 2420FWL 32.842533 N Lat, 103.942795 W Lon		9. API Well No. 30-015-42230-00-X1
		10. Field and Pool, or Exploratory LOCO HILLS
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Well Spud
	<input type="checkbox"/> Water Disposal

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

7/1/14 - HOLE SIZE: 14 ?? RN 10 JTS (443) 10.75" 32.75# H-40 STC 8RD CSG SET @ 390' (FLOAT COL @ 395') 3 CENTRALIZERS. CMT CSG W/150 SXS (43.8 BBLs) THIXOTROPIC+1% CACL2@14.2 LB/GAL&7.78 GAL H2O SX,YIELD 1.64 CUFT SX, FB TAIL 250 SXS (60 BBLs) PREM + W/2% CACL2 @ 14.8 LB/GAL & 6.39 GAL H2O SX TO YIELD 1.35 CUFT SX. CEMENT DID NOT CIRC. SET 50 SK PLUG PREM PLUS + 3% CACLZ. SET 50 SK PLUG PREM PLUS + 3% CACLZ. NOTIFIED JOE SALCEDO W/ BLM OF INTENT TO SPUD 6/29/2014 11:00 AM; CSG & CMT 11:00 AM 6/30/14; NOTIFY JIM HUGHES W/ BLM OF NO CIRC CMT & WILL RUN TEMPERATURE SURVEY @ 18:30 PM, 6/30/14; NOTIFIED JIM HUGHES W/BLM OF RESULTS OF TEMP SURVEY AND DEPTH OF CEMENTING THRU 1" @ 2:30 AM 7-1-14.

NM OIL CONSERVATION
ARTESIA DISTRICTAccepted for record
OCD NMOC 12/9/14

DEC 09 2014

14. I hereby certify that the foregoing is true and correct. Electronic Submission #251860 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFMSS for processing by DUNCAN WHITLOCK on 07/16/2014 (14DW0186SE)		RECEIVED
Name (Printed/Typed) LESLIE GARVIS	Title REGULATORY COORDINATOR	ACCEPTED FOR RECORD
Signature (Electronic Submission)	Date 07/07/2014	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____		DEC - 1 2014 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		
Title _____		
Office _____		
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.		

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Additional data for EC transaction #251860 that would not fit on the form

32. Additional remarks, continued