

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
FEB 08 2016

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**Artesia**

FORM APPROVED  
OMB NO. 1004-0135  
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 Ext: 326	8. Well Name and No. GISSLER B 111
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T17S R30E SWNE 2100FNL 1980FEL 32.850391 N Lat, 103.939926 W Lon		9. API Well No. 30-015-42312-00-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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Well Spud
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<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 recomplete 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.)

11/09/14 - HOLE SIZE: 14 ?? SPUD WELL 11/08/14, 6:15 AM. RN 13 JTS (531') 10.75" 32.75# H-40 STC 8RD CSG SET @ 528' (FLOAT COLLAR @ 488') 3 CENTRALIZERS 1ST 3 JTS. 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. DID NOT CIRC CMT. RUN TEMPERATURE SURVEY W/ VES WIRELINE / TOP CMT (315') TIH W/ 1" PIPE TAG 321' NORTH, SOUTH, EAST, & 319' ON WEST SIDE, PUMP 75 SK PLUG 14.8#, 3% CACL2 NOTIFIED RICHARD CARRASCO 12:45 PM, 11/7/14 INTENT TO SPUD, LEFT MESSAGE W/BLM AT 1:45 PM 11/8/14 OF CMT/CSG JOB, NOTIFIED RICHARD CARRASCO OF NOT CIRC CMT AND INTENT FOR TEMP SURVEY AND 1" CEMENTING AT 8:24 PM 11-8-14.

Accepted for record  
NMOCD

WDS 2/16/16

14. I hereby certify that the foregoing is true and correct. Electronic Submission #280580 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFMSS for processing by CATHY QUEEN on 06/22/2015 (15CQ0392SE)	
Name (Printed/Typed) LESLIE GARVIS	Title REGULATORY COORDIANTOR
Signature (Electronic Submission)	Date 11/14/2014
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By	Title
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.	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 \*\***