

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 re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

OCD - Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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. NMMN2748
2. Name of Operator BURNETT OIL COMPANY INC		6. If Indian, Allottee or Tribe Name
Contact: MARY STARKEY E-Mail: mcstarkey@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 69
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T17S R30E NWSW Lot L 2160FSL 430FWL		9. API Well No. 30-015-38671-00-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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

3. 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 recompleat 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.)

4/25/11 TD: 6056? LOG @ 6050?, RUN DSN/SPEC DEN COMP GR/DLL-MICRO-GUARD, LONG SPACED SONIC 1500?-TD, GR-N SURFACE-TD.

4/26/11 RUN 140 JTS 7? 23# J-55 CSG, TOTAL 6060?, SET SHOE @ 6056?, FC @ 6010?, MJ BTM 3311?, TOP 3289?, DV TOOL @ 2634?, 24 CENTRALIZERS 6034?-4089?

4/27/11 RELEASE RIG 4/27/11 @ 6:00AM

WASH 40? TO BTM, CIRC, RD CSG CREW & LD MACH, SAFETY MEETING W/ HALCO, CMT 1ST STAGE W/ 750 SX 50/50 POZ + .125 LBM POLY FLAKE @ 14.2 LB/GAL & 5.43 GAL H2O SX TO YIELD 1.27 CUFT SX, DISP W/ 140 BBL FW, 98.6 BBL DRLG FLUID, PLUG DID NOT BUMP, 1 BBL OVER, FLOAT HELD, DROP BOMB OPEN DV TOOL W/ PSI, CIRC DV TOOL, CIRC 127 SX CMT TO SUR 1ST STAGE, CMT 2ND STAGE W/ 1500 SX PREM LITE + 2% CACL2 + .125 LBM POLY FLAKE @ 12.7 LB/GAL & 10.08 GAL H2O SX TO YIELD 1.87 CUFT SX, FB 100 SX PREM PLUS + 2% CACL2 @ 14.8 LB/GAL & 6.39 GAL H2O SX TO YIELD 1.35 CUFT SX, DISP W/ 103.8 BBL FW, PLUG DN & HOLDING 6:45 PM, CIRC 300 SX TO SUR 2ND STAGE. WOC, RD HALCO, CLEAN PITS, ND BOP, SET SLIPS, CUT

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #111442 verified by the BLM Well Information System
For BURNETT OIL COMPANY INC, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH MCKINNEY on 06/27/2011 (11DLM0973SE)

Name (Printed/Typed) MARY STARKEY

Title REGULATORY COORDINATOR

Signature (Electronic Submission)

Date 06/24/2011

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

JAMES A AMOS
Title SUPERVISOR EPS

Date 07/02/2011

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 Carlsbad

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 #111442 that would not fit on the form

32. Additional remarks, continued

OFF, FINISH CLEANING PITS,