

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD 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. NMLC055958
2. Name of Operator BURNETT OIL COMPANY INC		6. If Indian, Allottee or Tribe Name
Contact: LESLIE M 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: 6326	8. Well Name and No STEVENS B 8
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T17S R30E NWNW 990FNL 890FWL		9. API Well No 30-015-40140-00-X1
		10. Field and Pool, or Exploratory CEDAR LAKE
		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	

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 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 )

5/13/12 - TD: 6,066'

5/18/12 - NOTIFIED BLM OF PRODUCTION CMT JOB 12:15pm MST on 05/17/12 - CONTACT JERRY BLAKLEY. NO REPRESENTATIVE PRESENT FOR JOB. RUN CSG - 140 JTS (6069.40') 7" 23# J-55 LTC 8RD - FC @ 6019' & DV TOOL @ 2613', CIRC, CMT 1ST STAGE W/800 SXS (182 BBLS) PREM H + .125 LBM POLY FLAKE @ 14.2 LB/GAL & 5.58 GAL H2O SX TO YIELD 1.28 CUFT SX. CIRC 307 SXS (70 BBLS) CMT TO SURFACE 1ST STAGE, CIRC DV TOOL W RIG PUMP, CMT 2ND STAGE W/1700 SXS (566 BBLS) PREM LITE + 2% CACL2 + .125 LBM POLYFLAKE @ 12.7 LB/GAL & 10.08 GAL H2O SX TO YIELD 1.87 CUFT SX, FB 100 SXS (24 BBLS) PREM PLUS + 2% CACL2 @ 14.8 LB/GAL & 6.39 GAL H2O SX TO YIELD 1.35 CUFT SX, CIRC 336 SXS (112 BBLS) TO SURFACE 2ND STAGE

05/18/12 - REL RIG 16:00 MST.

CSG press test?

Accepted for record  
NMOC**RECEIVED**  
JUN 05 2012  
NMOC ARTESIA

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #138659 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFMS for processing by KURT SIMMONS on 05/24/2012 (12KMS2097SE)	
Name (Printed/Typed) LESLIE M GARVIS	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 05/21/2012

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

<b>ACCEPTED</b> Approved By _____	JAMES A AMOS Title SUPERVISOR EPS	Date 06/03/2012
	Office Carlsbad	

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 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 \*\***