Form 3160-5 (November 1994)

Oil Cons. UNITED STATES M.M. DIV-Dist. 2 DEPARTMENT OF THE INTERIOR. Grand Avenue BUREAU OF LAND MANAGE DENTW. Grand Avenue SUNDRY NOTICES AND REPORTED TO WELL M. 88210

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

NMLC074939

5. Lease Serial No.

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other Instructions on reverse side					7. If Unit or 0	CA/Agreement, Name and/or No.	
1. Type of Well Oil Well Gas Well	7 ou		RE	CEIVED	8. Well Name		
2. Name of Operator OCT 2.6 2004					1	e and No. LERB #34	
BURNETT OIL CO., INC.					9. API Well I		
3a. Address 801 CHERRY STREET, SUITE 1500 3b. Phone No. (include area code)					30-01	5-33517	
UNIT #9, FORT WORTH, TX. 76102-6881 (817) 332-5108					4	Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					CEDA 11. County or	AR LAKE YESO Parish State	
UNIT E, 1650' FNL, 330' FWL, SEC 14,T17S,R30E					1 -	County, N.M.	
12. CHECK AF	PPROPRIATE BOX(ES) T	O INDICAT	E NATURE C	F NOTICE, R	EPORT, OR	OTHER DATA	
TYPE OF SUBMISSION			TYPE C	F ACTION			
☐ Notice of Intent	Acidize	Deepen Deepen	×	Production (Start	/Resume)	Water Shut-Off	
منو	Alter Casing	☐ Fracture	Treat 🔲	Reclamation	ָ ַ	Well Integrity	
Subsequent Report	Casing Repair		nstruction 🔲	Recomplete	ξ		
Final Abandonment Notice	Change Plans		i Abandon 🔲	Temporarily Ab	andon	NEW WELL	
 	Convert to Injection	Plug Ba	ck u	Water Disposal	 		
9/21-10/02/0 Install pump 24 holes @ 2 SPF. Acid	for final inspection.) sing unit and electricity. Dri dize perforations w/2000 1 w/5000# 100 mesh sand,	ill out DV too gals 15% No	ol, test casing to eFe. Frac sam	o 1000 psi- held ne perforations	ok. Perf 457: w/38,579 ga	els hot 20% FE acid. ^ 7/8" rods. Put well	
		CCEDTEE	TOD DEC	חמכ			
	A	OCT ALEXIS	2 5 2004 2 5 2004 C. SWOBODA UM ENGINEE			THECEIVED 2004 OCT 22 AM 9: 22 BUHENU OF LAND MEANT. ROSWELL OFFICE	
				•			
14. I hereby certify that the foregoi Name (Printed/Typed) S	ng is true and correct TERLING RANDOLPH		Title PER	rouerum emo	SINGER		
Signature Hulling Candidal			Date	10/18	/20	04	
	THIS SPACE	FOR FEDER	RAL ÖŘ STATI	E OFFICE USE			
Approved by			Title		Date	e	
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	al or equitable title to those rig				I		