

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.*

5. Lease Serial No.  
NMLC030570A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
STEVENS A 19

2. Name of Operator  
BURNETT OIL COMPANY INC  
Contact: LESLIE GARVIS  
E-Mail: lgarvis@burnettoil.com

9. API Well No.  
30-015-42232-00-X1

3a. Address  
801 CHERRY STREET UNIT 9  
FORT WORTH, TX 76102-6881

3b. Phone No. (include area code)  
Ph: 817-332-5108 Ext: 326

10. Field and Pool, or Exploratory  
CEDAR LAKE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 13 T17S R30E SESW 0990FSL 2210FWL  
32.829830 N Lat, 103.926629 W Lon

Accepted for record  
NMOCD,  
UD 11/3/15

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 checked="" type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Other
	<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.)

12/29/14 - HOLE SIZE: 8 ???. TEST BOP EQUIPMENT & VALVES 250# & 2000# F/ 10 MIN EA W RIG DAWG TESTER(ALL TESTS GOOD). TEST CSG W/1274 PSI FOR 30 MIN (HELD OK). NOTIFIED JIM HUGHES W/ BLM OF TAG, TOP OUT, & TEST 18:00 PM 12/28/14.

1/7/15 - SET 167 SKS CLASS H @ 17.5#, BALANCE PLUG 4445'-4145'. CALL RICHARD CARRASCO W/ BLM, NOTIFY OF PLUGGING & INTENT RUNNING CSG INTERIGY TEST AFTERWARDS W/ RIG.

1/8/15 - SET 120 SKS CLASS C @ 14.8#, BALANCE PLUG 2992'-2692'. SET 120 SKS CLASS C @ 14.8#, BALANCE PLUG 1449'-1149'. RUN INTEGRITY CSG TEST W/ RIG DAWG TESTING, TEST 500#, F/ 30 MIN TEST OK. NOTIFIED RICHARD CARRASCO 5:45 PM, 1/6/15 OF PLUGGING & CSG INTEGRITY TEST, HE SAID CALL IF PROBLEMS.

*operator proposed CIBP @ 423' was it set? submit subsequent w/ info.*

**NM OIL CONSERVATION**  
**ARTESIA DISTRICT**

OCT 30 2015

RECEIVED

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

Electronic Submission #298107 verified by the BLM Well Information System  
For BURNETT OIL COMPANY INC, sent to the Carlsbad  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/20/2015 (15JAM0173SE)

Name (Printed/Typed) LESLIE GARVIS Title REGULATORY COORDIANTOR

Signature (Electronic Submission) Date 04/14/2015

**ACCEPTED FOR RECORD**

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

OCT 12 2015

Approved By \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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 BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD 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.

**Additional data for EC transaction #298107 that would not fit on the form**

**32. Additional remarks, continued**

1/9/15 - TD: 5,176?. RR 01/08/15, 16:00 PM. Temporarily Abandon.