

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.  
**NMNM2748**

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.**

8. Well Name and No.  
**GISSLER B 12**

9. API Well No.  
**30-015-04302-00-S1**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
**BURNETT OIL COMPANY INC**

Contact: **LESLIE GARVIS**  
E-Mail: **lgarvis@burnettoil.com**

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

3b. Phone No. (include area code)  
**Ph: 817.583.8730**

10. Field and Pool, or Exploratory  
**GRAYBURG**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**Sec 23 T17S R30E NESE 1950FSL 990FEL**

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 checked="" 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 type="checkbox"/> Other
	<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.)

10/6/15 - MIRU, BLEED WELL DN, FIRST ROD WAS PARTED, FISHED ROD, POOH W/RODS, LAY PUMP DN, RUN 2" PARAFFIN KNIFE TO SN, DROP SV, TEST TO 1,000 PSI (GOOD), FISH SV, RU BOP, TAG BOTTOM (3084'), (PMPD 20BBLs FW)

10/7/15 - MIRU, PU BAILER, RIH W/TBG, TAG AT (3,084'), STARTED BAILING, CLEANED OUT TO (3,160'), WOULDN'T BAIL ANYMORE (HARD), POOH W/TBG, LAY DN BAILER, RIH W/TBG, ND BOP, LAND TBG, RU PRODUCTION MANIFOLD, PU PUMP, RIH W/RODS, SPACE WELL OUT, HANG PUMPING UNIT HEAD ON, RU TRUCK TEST TO 500PSI (GOOD), CHECK PUMP ACTION (GOOD), Run 100 JTS 2 3/8 J55 TBG

10/13/15 - RTP 24 HR Test: 1 BO, .77 MCF, 16.67 BW

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

*PD 11/20/15*  
**Accepted for record**  
**NMOCD**

**NOV 19 2015**

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

**Electronic Submission #320272 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 10/23/2015 (16JAS0726SE)**

Name (Printed/Typed) **LESLIE GARVIS** Title **REGULATORY COORDINATOR**

Signature (Electronic Submission) Date **10/16/2015**

**RECEIVED**

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

**ACCEPTED FOR RECORD**

Approved By **/s/ DAVID R. GLASS** 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 \_\_\_\_\_

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 #320272 that would not fit on the form**

**32. Additional remarks, continued**