

OCD - Artesia

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. NMNM2747
2. Name of Operator BURNETT OIL COMPANY INC Contact: MARY STARKEY E-Mail: mcstarkey@burnettoil.com		6. If Indian, Allottee or Tribe Name
3a. Address 801 CHERRY STREET UNIT 9 FORT WORTH, TX 76102-6881	3b. Phone No (include area code) Ph: 817-332-5108	7. If Unit or CA/Agreement, Name and/or No
4. Location of Well (Footage, Sec, T, R, M., or Survey Description) Sec 1 T17S R30E SESW 660FSL 1980FWL		8. Well Name and No. JACKSON B 30
		9. API Well No. 30-015-21386-00-S1
		10. Field and Pool, or Exploratory SQUARE 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 checked="" 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 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 checked="" 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 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.)

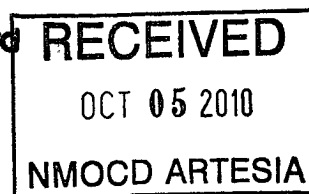
Burnett Oil Co., Inc. respectfully asks the BLM for an extentsion of time in order to correct the above mentioned well. It failed the MIT test.
Burnett Oil Co, Inc. plans to locate the leak and follow these procedures:

PROCEDURE:

- 1) RUSU.
- 2) Pull Cement Lined (CL) tubing and packer, set at 2835?, not sure what packer type. Determine whether to LD injection tubing to be inspected/repared.
- 3) PU work string and packer and RBP. Set RBP above top perf (top perf at 2871?).
- 4) Locate casing leak(s). Attempt to establish injection rate and pressure at leaks for design of cement squeeze.
- 5) Once leak in well is repaired, will discuss acid treatment on perfs.

within 60 days return well to an active status or submit plans to Abandon. Subject to like approval from OCD

Accepted for record
NMOC D/E
10/13/10



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

Electronic Submission #93502 verified by the BLM Well Information System
For BURNETT OIL COMPANY INC, sent to the Carlsbad
Committed to AFMSS for processing by KURT SIMMONS on 09/28/2010 (10KMS2360SE)

Name (Printed/Typed) MARY STARKEY	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 09/27/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By JAMES A AMOS	Title SUPERVISOR EPS	Date 10/03/2010
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 ****