

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 2748
2. NAME OF OPERATOR Burnett Oil Co., Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1500 InterFirst Tower, Fort Worth, TX 76102	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL, 660 FWL	8. FARM OR LEASE NAME Gissler "B"
14. PERMIT NO.	9. WELL NO. 20
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3722 GR	10. FIELD AND POOL, OR WILDCAT Square Lake - G - F
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 11-17S-30E
	12. COUNTY OR PARISH Eddy
	13. STATE NM

RECEIVED BY
AUG 08 1985
O. C. D.
ARTESIA, OFFICE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

6/24/85 Perforated 2 holes @ 2860. Set cement retainer @ 2736'. Cemented with 200 sx. Class C, 6% gel and 200 sx. Class H, 2% CaCl₂. Squeezed to 3000 psi. Reversed out 1½ bbls. cement from hole.

6/25/85 Perforated 2 holes @ 2693'. Set cement retainer @ 2360. Cemented with 200 sx. Class H, 6% gel, 150 sx. Class H, 2% CaCl₂. Squeezed to 3400 psi. Stung out of retainer. POOH.

6/27/85 Drilled out both retainers, pressured up on 5½" casing to 1000 psi. Held okay.

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

SIGNED

TITLE Production Superintendent

DATE 8/1/85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 6 1985

*See Instructions on Reverse Side