

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

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

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 801 Cherry St., Suite 1500, Fort Worth, TX 76102 D.		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface Unit D, 660' FNL, 660' FWL, Sec. 14, T17S, R30E		8. FARM OR LEASE NAME Gissler "B"	
14. PERMIT NO.		9. WELL NO. 23	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3712' GR		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson	
		11. SEC., T., R., OR BLK. AND SURVEY OR AREA 14-17S-30E	
		12. COUNTY OR PARISH Eddy	13. STATE NM

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 type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input checked="" 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"/>	(Other) <input type="checkbox"/>
(Other) Additional Zones <input checked="" 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.) *

This well was completed 4/19/86. Production has declined to 22 BOPD. We propose to perforate the Jackson zone 3300'-3430', the Lovington zone 3073'-3085', and the Metex zone 2827'-2832'; proposed stimulation will consist of 1000 gal. 15% HCl on the Jackson, 500 gal. 15% HCl and 14,000 gal./±20,000# 20-40 sand frac on the Lovington, 500 gal. 15% HCl and 14,000 gal./20,000# 20-40 sand frac on the Metex.

RECEIVED
DEC 21 11 03 AM '87
CARTER COUNTY COURSE
AREA HEADQUARTERS

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

SIGNED John C. McPhaul TITLE Production Superintendent DATE 12/14/87

(This space for Federal or State office use)

APPROVED BY 1-25-88 TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side