Form 3160-5 (August 2007)

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.				NMLC055264 6. If Indian. Allottee or Tribe Name		
				7. If Unit or CA/Agreement, Name and/or No.		
Type of Well				8. Well Name and No. JACKSON B 48		
2. Name of Operator Contact: LESLIE M GARVIS BURNETT OIL COMPANY INC E-Mail: Igarvis@burnettoil.com				9. API Well No. 30-015-41540-00-S1		
3a. Address 801 CHERRY STREET UNIT 9 FORT WORTH, TX 76102-6881 3b. Phone No. (include area code) Ph: 817-332-5108 Ext: 6326				10. Field and Pool, or Exploratory CEDAR LAKE UNKNOWN		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State		
Sec 12 T17S R30E NENE 330FNL 990FEL 32.855231 N Lat, 103.919644 W Lon				EDDY COUNTY, NM		
12. CHECK APPR	ROPRIATE BOX(ES) TO INDICA	ATE NATURE OF N	NOTICE, REPOR	T, OR OTHER	DATA	
TYPE OF SUBMISSION		FACTION				
Notice of Intent ■ Notice of Intent Notice of Inten		Deepen Produ		tart/Resume)	■ Water Shut-Off	
☐ Subsequent Report	- · · -	Fracture Treat	☐ Reclamation		■ Well Integrity	
	– ε . –	New Construction Re			Other Change to Original A	
☐ Final Abandonment Notice		☐ Plug and Abandon ☐ Tempo ☐ Plug Back ☐ Water			PD PD	
Burnett Oil is respectfully requesting an extension to the reclamation dear completion work. We need the additional pad space for workover equipme an extension through the end of September 2014 for additional completion. Accepted for record FECEIVED NMOCD NMOCD NMOCD ARTESIA			pment therefore we are requesting			
14. I hereby certify that the foregoing is true and correct. Electronic Submission #232300 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER MASON on 02/04/2014 (14JAM0090SE) Name(Printed/Typed) LESLIE M GARVIS Title REGULATORY COORDINATOR						
	······································					
Signature (Electronic S	ubmission)	Date 01/16/20	014			
	THIS SPACE FOR FEDE	RAL OR STATE	OFFICE USE			
Approved By JAMES A AMOS		TitleACTING F	IELD MANAGER		Date 02/06/2014	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduction	or	Office Carlsbad				
	J.S.C. Section 1212, make it a crime for an tatements or representations as to any matt		willfully to make to a	ny department or a	gency of the United	