

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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM2748
2. Name of Operator BURNETT OIL COMPANY INC Contact: LESLIE M GARVIS E-Mail: lgarvis@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 Ext: 6326	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T17S R30E SENE 1680FNL 1210FEL 32.822504 N Lat, 103.937427 W Lon		8. Well Name and No. GISSLER B 104
		9. API Well No. 30-015-41801-00-X1
		10. Field and Pool, or Exploratory LOCO HILLS
		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 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Well Spud
	<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 recomplate 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.)

12/19/13 - NOTIFY RICHARD W BLM OF NO CIRC CEMENT & INTENT TO RUN TEMPERATURE SURVEY & 1" PIPE @ 21:30 PM 12/18/2013, NOTIFY RICHARD W/ BLM OF CEMENT CSG 12:30 PM 12/18/13, NO WITNESS ON CMT JOB, NOTIFIED RICHARD W/ BLM OF INTENT TO SPUD 12/17/13 11:00 AM. HOLE SIZE: 14 ?? . RN 10 JTS (441') 10.75" 32.75# H-40 STC 8RD CSG SET @ 406' (FLOAT COL @ 359') 3 CENTRALIZERS, CMT CSG W 150 SXS (43.8 BBLs) THIXOTROPIC + 1% CACL2 @ 14.2 LB/GAL & 7.78 GAL H2O SX TO YIELD 1.64 CUFT SX, FB 250 SXS (60 BBLs) PREM + W/2% CACL2 @ 14.8 LB/GAL & 6.39 GAL H2O SX TO YIELD 1.35 CUFT SX. CMT DID NOT CIRC, WOC, RD CMTES, CLEAN PITS & REFILL W PW, RUN TEMP SURVEY W/ ROTORY WL, TOC 275', TIH W 1", TAG 248' EAST, 246' NORTH, 248' SOUTH, 247' WEST, SET 50 SX PREMIUM PLUS + 3% CACLZ PLUG WOC

Accepted for record
CRD NM300 3/11/14

14. I hereby certify that the foregoing is true and correct. Electronic Submission #230382 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFMSS for processing by JOHNNY DICKERSON on 01/28/2014 (14JLD1806SE)	
Name (Printed/Typed) LESLIE M GARVIS	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 12/23/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ACCEPTED	JAMES A AMOS Title SUPERVISOR EPS	Date 02/17/2014
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 ****