

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

DISTRICT II ARTESIA O.C.D.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. GISSLER 3
2. Name of Operator BURNETT OIL COMPANY INC Contact: LESLIE GARVIS E-Mail: lgarvis@burnettoil.com		9. API Well No. 30-015-42046-00-S1
3a. Address 801 CHERRY STREET UNIT 9 FORT WORTH, TX 76102-6881	3b. Phone No. (include area code) Ph: 817.583.8730	10. Field and Pool or Exploratory Area LOCO HILLS-GLORIETA-YESO
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T17S R30E SWSE 645FSL 2505FEL 32.843401 N Lat, 103.941629 W Lon		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing <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 Hydraulic Fracture
	<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 recomplete 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

10/18/17 - BLEED DWN CSG, FINISH TOH W/2-7/8" PROD TBG, SET RBP @ 5,350', SET PKR @ 5,338', RU KT & TEST RBP TO 2000 PSI (GOOD), RELEASE PKR & CIRCULATE 7" PROD. CSG CLEAN W/192 BBLS OF FW, TEST 7" CSG TO 2000 PSI (GOOD), PERF @ 5018, 5036, 5044, 5076, 5082, 5092, 5100, 5112, 5142, 5160, 5172, 5214, 5228, 5234, 5256, 5300, 5312, 2 SPF, 17 INTERVALS.

10/19/17 - , BREAK CIR & SPOT 250 GAL OF 15% NEFE ACROSS UY PERFS (5,018 - 5,312'), PULL PKR ABOVE PERFS & SET @ 4,940', ACIDIZE W/2500 GAL OF 15% NEFE & 70 BALL SEALERS.

10/23/17 - , FRAC DOWN 7" 23# J55 PROD CSG W/309,834 GAL OF SLICKWATER W/37,858 # OF 100 MESH @ 1 #/GAL, 173,619 # OF 40/70 @ 0.5# - 1.5#/GAL, 36,900 # OF 40/70 SLC STAGED 1.75# - 2.0#/GAL, 157 GAL OF SCALE INHIBITOR PUMPED THROUGH OUT FRAC, SPOT 750 GAL OF 15% HCL ACROSS PADDOCK IN FLUSH.SET WLRBP @ 5,350', TEST RBP TO 2,000 PSI (GOOD). PERFORATE @ 4,548', 4,556', 4,586', 4,606',

GC 5-24-18
Accepted for record - NMOC

14. I hereby certify that the foregoing is true and correct. Electronic Submission #397198 verified by the BLM Well Information System For BURNETT OIL COMPANY INC, sent to the Carlsbad Committed to AFSS for processing by PRISCILLA PEREZ on 12/11/2017 (18PP0459SE)	
Name (Printed/Typed) LESLIE GARVIS	Title REGULATORY MANAGER
Signature (Electronic Submission)	/s/ Jonathon Shepard
	Date 12/07/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date MAY 10 2018
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 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE		

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.

(Instructions on page 2)

** BLM REVISED **