

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.

5. Lease Serial No.
NMLC029338A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
GISSLER A 46

9. API Well No.
30-015-41544-00-X1

10. Field and Pool, or Exploratory
LOCO HILLS

11. County or Parish, and State
EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
BURNETT OIL COMPANY INC
Contact: LESLIE M GARVIS
E-Mail: lgarvis@burnettoil.com

3a. Address
801 CHERRY STREET UNIT 9
FORT WORTH, TX 76102-6881

3b. Phone No. (include area code)
Ph: 817-332-5108 Ext: 6326

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 23 T17S R30E NENE 330FNL 330FEL
32.826211 N Lat, 103.934558 W Lon

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 Drilling Operations
	<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 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.)

9/9/13 - HOLE SIZE: 8 ?? RUN 140 JTS 7", 23#, J-55, LTC CSG 6107.99, SET @ 6100', FC @ 6053', 2 MARKER JTS, 1ST TOP 4493', BTM 4515', 2ND TOP 3504', BTM 3526', DV TOOL 2624'. NOTIFY RICHARD CARASCO W/ BLM OF RUNNING & CMTING 7" PROD CSG 8:07 AM 9/8/2013.

9/10/13 - CMT 1ST STAGE W/700 SXS (160 BBLs) PREM H + .125 LBM POLY FLAKE @ 14.2 LB/GAL & 5.58 GAL H2O SX TO YIELD 1.28 CUFT SX - DISP W 150 BFW & 88 BBL DRLG FLUID - PLUG DN 9:09 AM 9/9/2013, DROP OPENING DEVICE 700# / CIRC DV TOOL - CIRC 10 BBLs CMT TO PIT, CMT 2ND STAGE W 1000 SXS (318 BBLs) PREM LITE + 2% CACL2 + .125 LBM POLYFLAKE @ 12.7 LB/GAL & 10.08 GAL H2O SX TO YIELD 1.87 CUFT SX, FB 100 SXS (24 BBLs) PREM PLUS + 2% CACL2 @ 14.8 LB/GAL & 6.39 GAL H2O SX TO YIELD . - CIRC 50 BBLs, 127 SX CMT TO SURFACE 2ND STAGE. PUMP 200 SX CLASS H @ 15.6#, 1.18 YIELD, DOWN ANNULAR, PRESS 50# TO 300#. RIG RELEASED 6:00 AM 9/10/2013.

Accepted for record
NMOCD 11/20/13

RECEIVED
NOV 13 2013
NMOCD ARTESIA

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #222452 verified by the BLM Well Information System
For BURNETT OIL COMPANY INC, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 10/29/2013 (14DMH0230SE)

Name (Printed/Typed) LESLIE M GARVIS Title REGULATORY COORDINATOR

Signature (Electronic Submission) Date 10/09/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By **ACCEPTED** Title JAMES A AMOS SUPERVISOR EPS Date 11/10/2013

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.