

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD - Artesia

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. NMLC029339A
2. Name of Operator BURNETT OIL COMPANY INC ✓		6. If Indian, Allottee or Tribe Name
Contact: MARY STARKEY E-Mail: mcstarkey@burnettoil.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 801 CHERRY STREET UNIT 9 FORT WORTH, TX 76102-6881	3b. Phone No. (include area code) Ph: 817-332-5108	8. Well Name and No. JACKSON A 34 ✓
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T17S R30E SENE 1650FNL 890FEL ✓ UL H		9. API Well No. 30-015-34223-00-S1
		10. Field and Pool, or Exploratory CEDAR LAKE YESO
		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 checked="" 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 type="checkbox"/> Other
	<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 recompleat 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.)

3/9/11 PERF 29 INTERVALS, 2SPF, .43" HOLE,  
@ 5135', 5138', 5163', 5168', 5207', 5218', 5224', 5232', 5235', 5243', 5252', 5262', 5267', 5328',  
5356', 5363', 5367', 5375', 5380', 5395', 5402', 5413', 5459', 5556', 5580', 5611', 5621', 5759',  
5772',  
PERF 6 INTERVALS, 3 SPF, .43" HOLE @ 5552', 5568', 5616', 5795', 5801', 5805', RD E&P WL,  
RIH W/ PKR AND TBG TO 4610', SDON  
3/10/11 RIH TO 5043', SET PKR PO TO 5043', SET PKR, PRESSURED UP TO 2000 #, LET ACID  
SOAK, WELL BROKE DN, ACIDIZE W/ 2500 GALS NEFE 15% ACID AND 156 BALL SEALERS,  
BALLOUT W/ 110 BALL SEALERS ON FORMATION, MAX PSI 3800#, AVG PSI 2600#,  
MAX RATE 6 BPM, AVG RATE 5.6 BPM, BLWTR 112, ISIP 1878#, 5 MIN 1437#, 10 MIN 1391#,  
15 MIN 1368#, RD CUDD, BLED WELL DN, RIH KNOCKOFF BALLS, PO TO 4610', SDON  
3/14/11 SLICKWATER FRAC W/ 1,352,232 GALS SLICKWATER,

Accepted for record - NMOCD  
3/22/11 4-26-11

14. Thereby certify that the foregoing is true and correct. <b>Electronic Submission #105125 verified by the BLM Well Information System</b> <b>For BURNETT OIL COMPANY INC, sent to the Carlsbad</b> <b>Committed to AFMSS for processing by KURT SIMMONS on 03/28/2011 (11KMS1224SE)</b>	
Name (Printed/Typed) MARY STARKEY	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 03/24/2011

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 04/17/2011
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 \*\***

**Additional data for EC transaction #105125 that would not fit on the form**

**32. Additional remarks, continued**

43,000# 100 MESH, 410,055# 40/70 SN, 50 BALLSEALERS, MAX PSI 3932, AVG PSI 3507,  
MAX RATE 74.1 BPM, AVG RATE 68.3 BPM, ISIP 1637, 5 MIN 1578, 10 MIN 1569,  
15 MIN 1556, 32,196 BLWTR,  
3/23/11 24 hour test 240 BO, 1119 BLW, 457 MCF

This was a refrac.