

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993	
5. Lease Designation and Serial No.	
6. If Indian, Allottee or Tribe Name	
7. If Unit or CA, Agreement Designation 7940004970	
8. Well Name and No. REED A-3 NO. 3	
9. API Well No. 30-025-04175	
10. Field and Pool, or Exploratory Area EUMONT; YATES 7-RVRS QN PRO GAS	
11. County or Parish, State LEA, NM	

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use 'APPLICATION FOR PERMIT' for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator BURGUNDY OIL & GAS OF NEW MEXICO, INC.	
2. Address 401 W. TEXAS AVE., SUITE 1003	Telephone No. MIDLAND, TX 79701-4413
3. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 660' FEL, UL I, SEC. 3, T20S, R36E	

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12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

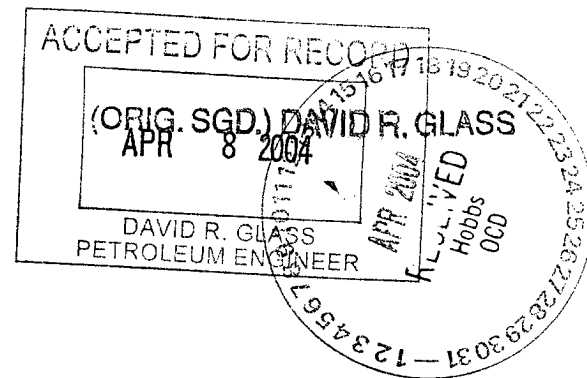
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other RETURN TO PRODUCTION	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. TOOH with tbg.
2. TIH with bit and drill out cement and CIBP.
3. Clean out bottom.
4. RIH with production equipment and place on rod pump.
5. Set pumping unit and make all tie ins.
6. Production test and potential

Accepted for record only! Approval subject to returning well to continuous production and keeping well on continuous production!



14. I hereby certify that the foregoing is true and correct

Signed Dublin McKelvey, Agent Title Agent, for Ben Taylor, Principal
(This space for Federal or State office use)

Date 3/31/04

Approved by _____ Title _____
Conditions of approval, if any: _____ Date _____

GWW