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Form 3160-5  
(June 1990)

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UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

JAN 9 1993

O. C. D.

CARD 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

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.  
LC - 029395-B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
TURNER "B" # 51

9. API Well No.  
30-015-05298

10. Field and Pool, or Exploratory Area  
Grbg-Jackson-7Rvs-QN-GB-SA

11. County or Parish, State  
Eddy Co. NM

SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
Avon Energy Corp. ✓

3. Address and Telephone No.  
P.O. Box 38, Loco Hills, NM 88255 (505) 677-3223

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
2955' FSL, 660' FEL, Sec 20-T17S-R31E  
2055'

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

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☒ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other \_\_\_\_\_
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ 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.)

3/09/91 Perf: Up. Grbg 2811,18',21',22',24',27'  
2888',90',97',98',99'  
2937',38'

3/09/91 Acidized 2811-2988' w/2000 gal 15% NeFe acid  
3/12/91 Frac 2811-2938' w/40,000 gal x-linked gel carrying  
60,400# 20/40 snd + 16,000# 12/20 snd. Max 4000#,  
Avg 3600#, Min 100#. ISIP 2125#

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

Signed \_\_\_\_\_ Title Production Manager

Date 1-6-93

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

Date \_\_\_\_\_

Title 18 U.S.C. Section 1001, makes 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.

\*See Instruction on Reverse Side