Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING OFFICE FOR IN OR OTHER INFO. (Other instructions on reverse side)

NM Roswell District
Modified Form No.
NM060-3160-4

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029395-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [X] GAS WELL [ ] OTHER **Change of Operator**

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Avon Energy Corp.

3a. Area Code & Phone No.: 505/677-3223

8. FARM OR LEASE NAME: Turner "B" (B)

3. ADDRESS OF OPERATOR: P.O. Box 38, Loco Hills, NM 88255

9. WELL NO.: 43

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface: 660' FSL & 560' FWL

RECEIVED
MAR - 1 1991
O. C. D.
ARTESIA, OFFICE

10. FIELD AND POOL, OR WILDCAT: Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 20-17S-31E

14. PERMIT NO.: 30-015-05314

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH: Eddy

13. STATE: NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF		WATER SHUT-OFF	
FRACTURE TREAT		FRACTURE TREATMENT	
SHOOT OR ACIDIZE		SHOOTING OR ACIDIZING	
REPAIR WELL		(Other) Change of Operator	XX
(Other)			
PULL OR ALTER CASING		REPAIRING WELL	
MULTIPLE COMPLETE		ALTERING CASING	
ABANDON*		ABANDONMENT*	
CHANGE PLANS			

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

17. 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.)*

The parties listed below wish to notify this Commission of a change of operator on the above described well as follows:

From: Socorro Petroleum Company
P.O. Box 38
Loco Hills, NM 88255

To: Avon Energy Corp.
P.O. Box 38
Loco Hills, NM 88255
(505)677-3223

Effective 1/18/91

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

SIGNED [signature] TITLE Consultant DATE 2-25-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.