

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

MAR 26 1992

O. C. Deir.
ARTESIA OFFICE

SUBMIT IN TRIPLICATE

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

2. Name of Operator

AVON ENERGY CORPORATION

3. Address and Telephone No. P.O. Box 37 Ph. 505-677-3223

Loco Hills, New Mexico 88255

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

160' FSL, 1370' FWL Sec. 17-17S-31E

(UNIT N)
(SESW)

5. Lease Designation and Serial No.

LC 029395-B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Turner "B" Waterflood

8. Well Name and No.

Turner "B" No. 104

9. API Well No.

30-015-70074-91

10. Field and Pool, or Exploratory Area

Grayburg - Jackson

11. County or Parish, State

Eddy County, N.M.

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 Re-Instatement

- ☐ 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.)*

Please re-instate approval for drilling of above well. Drilling prognosis and proposed surface use plan will remain as previously approved.

Drilling will be commenced as soon as engineering evaluations of the project are completed.

Post ID-1
4-17-92

Re-instate Intent

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

Signed

Title Permit Agent

Date March 18, 1992

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: