

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OIL COL. RECOVERY DIV.
811 S. 1st ST.
ARTESIA, NM 88210-2834

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

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☒ Other WIW SJS
2. Name of Operator
AVON ENERGY CORPORATION ✓
3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 1980' FWL, Sec. 29-17S-31E

5. Lease Designation and Serial No. LC-029395-B
6. If Indian, Allottee or Tribe Name N/A
7. If Unit or CA, Agreement Designation N/A
8. Well Name and No. Turner "B" #66
9. API Well No. 30-015-04902
10. Field and Pool, or Exploratory Area Grayburg Jackson
11. County or Parish, State Eddy County, NM

CHECK APPROPRIATE BOX(S) 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"/> Abandonment (Temp.)
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input checked="" type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)*

Originally, we planned a workover on this well & to return it to water injection. The following work was done on the well:

3/28/96 to 4/13/96 - Ran bit & scraper, press tested and found hole @ 34', attempted to squeezed 4 1/2" csg w/68 sx cmt, circ'd to surface. Drilled out & attempted to pressure up. Ran bit & scraper. Pumped 80 sx "C" down 4 1/2" csg. Drld out & tested. Attempted squeezed again w/100 sx "C" @ hole @ 28'. Drld cmt out, cleaned out & attempted to pressure up, lost pressure. Tested csg @ 300 psi for 15 min. Acidized perfs 3283'-3672' w/6000 gals 15% HCl acid + 1000 rock salt + 80 BS, swabbed. Circ'd pkr fluid & set pkr. Csg would not hold, leak between 35' & surface. Pumped 50 sx cmt. Cmt came out beside well. Spotted 50 sx cmt down csg till hole filled up. Drld out, would not hold. Temporarily abandoned well.

We now plan to plug and abandoned well.

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

Signed Karen Byers Title KAREN BYERS ENGINEERING TECHNICIAN

Date 4/23/96

Approved by _____
Conditions of approval, if any: _____

Title _____

Date _____

SJS