

UNITED STATES

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FORM APPROVED

Form 3160-5 June 1990)	DEPARTMENT OF	THE INTERIOR	Budget Bureau No. 1004-0135
Julie 1990)	BUREAU OF LAND		Expires: March 31, 1993 5. Lease Designation and Serial No.
			NM 27918
SUNDRY NOTICES AND REPORTS ON WELLS. C. D.			6. If Indian, Allottee or Tribe Name
Do not use this	form for proposals to drill or Use "APPLICATION FOR PE	to deepen or reentry to a different reservoir	
	SUBMIT IN T	TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well			
Oil X Ga	as RECOMPLETIO	8. Well Name and No.	
2. Name of Operator		South Avalon MA Fed. Com #1	
	LEUM CORPORATION V		30-015-23079
3. Address and Telepho	th St., Artesia, NM 88	10. Field and Pool, or Exploratory Area	
4. Location of Well (Fo	potage, Sec., T., R., M., or Survey Description	Und. Burton Flat Atoka	
			11. County or Parish, State
	0' FSL & 660' FEL, Sec.	Eddy, NM	
12. CHEC	K APPROPRIATE BOX(s) TO	D INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
	TYPE OF SUBMISSION TYPE OF ACTIO		
Not	ice of Intent	Abandonment	Change of Plans
		Recompletion	New Construction
X Sub	sequent Report	Plugging Back	Non-Routine Fracturing
		Casing Repair	Water Shut-Off
Fin:	al Abandonment Notice	Altering Casing	Conversion to Injection
		X Other Plugback, perforate	(Note: Report results of multiple completion on Well
			Completion or Recompletion Report and Log form.)
13. Describe Proposed o	or Completed Operations (Clearly state all perting locations and measured and true vertical dep	nent details, and give pertinent dates, including estimated date of star ths for all markers and zones pertinent to this work.)*	ang any proposed work. It went is directionally drained,
8-20-91. R w/23 .40" h 10587-610' 8-28-91. R 8-31-91. P NEFE acid.	U unit. Set CIBP 10857' oles (2 SPF) as follows w/2000 gals 15% NEFE ac e-acidized perfs 10587-	w/35' of cement on top. Performs: 10587-591, 10593-596, 10605-6 cid. -10610' w/8000g. 15% NEFE HCL with the wit	607, 10610'. Acidized perfs 1th 750 scf N2.
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	n the foregoing is true and correct	Tide Production Supervisor	Date 10-10-91
Chicanace for Fer	ieral or State office use)		
		Title	Date
Approved by Conditions of appro	oval, if any:		\$35 2.5