Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

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5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.							6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side						7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well Oil Well Gas Well Other	/	(8. Well N			· /		
2. Name of Operator Echo Production, Inc.							ton 31 Federal	#3/		
						ell No.				
3a. Address PO Box 1210, Graham, TX 76450			3b. Phone No. (include area code) (940) 549-3292				6 6 5 6 ol, or Exploratory Ar			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			(040) 040-0232				n Ridge; Delaw			
2004.01.01.01.01.01.01.01.01.01.01.01.01.01.		11. County			<i>;</i>					
1810' FSL & 330' FEL Sec 31			Lea	Lea County, NM						
12. CHECK APPROPRI	ATE BOX(ES) TO	INDICAT	E NATURE (OF NOTIC	E, REPORT, O	R OT	THER DATA.			
TYPE OF SUBMISSION	YPE OF SUBMISSION TYPE OF ACTION									
∑ A	cidize [Deepen		Production	(Start/Resume)		Water Shut-Off			
☐ Notice of Intent ☐ A	lter Casing [☐ Fracture	freat 🔲	Reclamatio	on		Well Integrity			
Subsequent Report		New Con		•		Ø	Other			
		Plug and		Temporarily Abandon		Add Delaware F	ure perí			
☐ Final Abandonment Notice ☐ Co	onvert to Injection	Nug Bac	k 🛚	Water Disp	oosal	•				
following completion of the involved oper testing has been completed. Final Aband determined that the site is ready for final in 8/8-12/2013 * Set CIBP @ 8300' w/2 * Ran packer to 7184' 8 * Pull packer to 6855' at Perforate Delaware 8' * Acidize w/750 gals 7' * Swab test	onment Notices shall be aspection.) 2 sx cmt	filed only af 200 to 1500# ace to 150	ter all requireme	nts, including	g reclamation, have	been	HOBBS OCD EP 2 5 2013	operator has		
* POP with 2 7/8" tbg &	packer at 8101' &	86 rod str	ing			٠	RECEIVED			
14. I hereby certify that the foregoing is true a	nd correct				4*************************************		···			
Name (Printed/Typed) Tom Golden			Title Oper	rations Ma	anager					
Signature Jon Hold			Date 8	/29/20 13	CCEPTED	FOF	R RECORD	,		
	THIS SPACE FO	OR FEDER	AL OR STAT	E OFFICE	U\$E					
			<u> </u>		AEP I	2 2	20,13			
Approved by		Title		1//	Date	#UX/X	90			
Conditions of approval, if any, are attached certify that the applicant holds legal or equit which would entitle the applicant to conduct or			BURFAU OF LAN CARLSBAD I	ID MA	ANAGEMENT OFFICE	War				

Title 18 U.S.C. Section 1001 and Title 42 U.S.C. Section 212 Taske 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 states are representations as to any master within its jurisdiction.