

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-33671
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Echo Production, Inc.		6. State Oil & Gas Lease No. 34361
3. Address of Operator PO Box 1210, Graham, Texas 76450		7. Lease Name or Unit Agreement Name Stiletto '16' State
4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>south</u> line and <u>660</u> feet from the <u>east</u> line Section <u>16</u> Township <u>20S</u> Range <u>25E</u> NMPM County <u>Eddy</u>		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3542 GL		9. OGRID Number 06742
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ P AND A ☐
CASING/CEMENT JOB ☒

OTHER: ☐

OTHER: New Well (Amended Report) ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/05/05 Spud well & drill to 352'
1/07/05 Could not get casing below 306'. Received OCD permission to set casing at 306'. Set 306' 13 3/8" 48# H-40 csg. Cmt w/ 480 sx Class H. TOC 82'. 1" cmt to surface w/ 475 sx Class C + 4% CaCl & 250 sx Class H Thix + 2% CaCl. WOC 14 hrs. Test csg to 600 psi, 30 min.
1/11/05 Set 8 5/8" 32# J-55 csg @ 1414' w/ 600 sx Class C 35/65 pox + 2% CaCl & 360 sx Class H + 10# LCM + 1% CaCl. 200 sx circ to surface. WOC 14 3/4 hrs. Test csg 1000#, 30 min.
2/01/05 Drilled to TD of 9750'. Set 4 1/2" 11.6# N80 csg w/ DV tool @ 3321'. Cmt 1st stage w/ 725 sx Class H 50/50 Poz and 2nd stage w/ 600 sx Class C + 1% CaCl. TOC 890'. CBL.
4/05/05 Test csg 1500#, 30 min. Perf Morrow 9403-07', 9465-76', 9482-84' & 9607-12' 1 SPF. Acidize w/ 2500 gals 7 1/2% HCl.
4/09/05 Frac perfs 9403-9612' w/ 64000 gals & 57000# 18/40 Versa prop.
4/13/05 Test 2490 MCF/D on 13/64" ck @ 1674# FTP. SD waiting on pipeline connection.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Ken Seligman *Ken Seligman* TITLE Engineer DATE 5/17/05

Type or print name
For State Use Only

E-mail address: ken.s@echoproduct.com Telephone No. (940) 549-3292

APPROVED BY: _____ TITLE _____ DATE MAY 23 2005

FOR RECORDS ONLY