

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

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

Form C-103

May 27, 2004

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. 30-015-34150
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		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, TX 76450		7. Lease Name or Unit Agreement Name Stiletto '16' State
4. Well Location Unit Letter <u>M</u> : <u>990</u> feet from the <u>south</u> line and <u>725</u> feet from the <u>west</u> line Section <u>16</u> Township <u>20S</u> Range <u>25E</u> NMPM County <u>Eddy</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3496' GR		9. OGRID Number 06742
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Cemetary Morrow
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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

7-18-05 Set 80' of 20" conductor
 8-09-05 Spud well w/ Drlg rig, 11:45 pm
 8-10-05 Set 13 3/8" 48# H-40 csg @ 354' GL. Cmt w/ 180 sx Cls H Thixotropic + 10% CSE + 1% CaCl + 125 sx 35-65-6 Cls C Poz w/ 2% CaCl + 250 sx Cls C w/ 2% CaCl. Cmt to surface @ end of job and fell back. TOC @ 85' by temp svy. Repair w/ Redimix per Mike Bratcher, OCD. Cmt to surf w/ 4.5 yds redi-mix. WOC 34 hrs. Test csg to 1000 psi/30 min
 8-15-05 Set 8 5/8" 32# J-55 @ 1485' RKB. Cmt w/100 sx Cls H + 10% A-10 + 1% CaCl₂ + 250 sx 35-65-6 Cls C Poz + 5# salt + 200 sx Cls C + 2% CaCl₂. Full returns, bump plug 3:15pm w/ 1000 psi 75 sx circ to pit. Check float-not holding, hold 100 psi on csg. w/o cmt 34.2 hrs. Test csg to 2000 psi f/ 30 min.
 9-10-05 TD well @ 9780' set 5 1/2" 17# N-80 @ 9779' RKB. Cmt w/ 930 sx 35-65 poz Cls C + .15% R3 + 5# sk NaCl + 6% gel @ 12.5 ppg + 500 sx 15-61-11 Poz Cls C CSE @ 13.2#/gal. Full returns, circ cmt to surf, 28 sx to pit. Bump plug w/ 2000 psi over. 6:15 am 9-10-05. Floats held. NU & test tbg spool 4000 psi. Note: 5 1/2" set instead of 4 1/2".

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 TITLE Engineer DATE 9/22/05

Type or print name Ken Seligman

E-mail address: ken.s@echoproduction.com Telephone No 940-549-3292

For State Use Only

FOR RECORDS ONLY

SEP 26 2005

APPROVED BY: _____ TITLE _____ DATE _____