Form 3160 5 (November 1994)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 OMB No. 1004-0135 July 31, 1996	dsF
N.M. DIV. Dist 2	

	BUREAU OF LAND MANA		4004	W Grand		
Do not use thi	NOTICES AND REPO s torm for proposals to II. Use Form 3160-3 (API	drill or to re-en	<sub>iter an</sub> Arte		8821 Or Tribe Name	
SUBMIT IN TRI	PLICATE - Other Instri	uctions on rev	erse side	7. If Unit of	or CA/Agreement, Name and/or No.	
Type of Well Gas Well Other					ame and No.	
Name of Operator / Echo Production, Inc.				9. API We	Little Feat '27' Federal #.  9. API Well No.  30-015-31609	
PO Box 1210, Graham, TX 76450 (940)			include area code) 9–3292	10 Field and Pool or Evaluations Area		
1. Location of Well (Footage, Sec., T., R., M., or Survey Description) 860' FSL & 790' FEL Sec 27 T20S R21E				11. County Eddy	11. County or Parish, State  Eddy, New Mexico	
12. CHECK AP	PROPRIATE BOX(ES) T	O INDICATE N	ATURE OF NOTICE	, REPORT, O	R OTHER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION			
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat			Water Shut-Off Well Integrity	
Subsequent Report  Final Abandonment Notice	Casing Repair Change Plans Convert to Injection	New Construct Plug and Aba Plug Back			Other	
include on that r		ld size to b	e drilled for t		8/9/01. I failed to casing was to be	
changea 110m 11	(on original point	2345				
		RECEIVE OCD ARTE	ISIA MA	OCT 1  GARY GOUR TROLEUM EN	2001 RLEY	
14. I hereby certify that the foregoin Name (Printed/Typed)	ng is true and correct		Title			
Tom Golden			Operations M	lanager		
Signature Jan Sc	ld_		Date 8/31/01			
	THIS SPACE	FOR FEDERAL	OR STATE OFFICE	USE		
Approved by			Title		Date	
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	al or equitable little to those rig	tice does not warran	Office case			