	Form 3160 5 (November 1994)
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Oil Gons.	
N.M. DLV-Dis	t. 2 FORM APPROVED
301 W. (nd A	Venue Expires July 31, 1996

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Form VI60 5 November 1994)	UNITED STATES BUREAU OF LAN MANA	TERIOR		N.M. D <u>IN</u> 01 W. (\rtesia, NI	nd Aver	FORN OMB Expire	No. 1004-0135 rs. July 31, 1996
SUNDA)	NOTICES AND REPO	RTS ON WELL	LS	aresia, ivi	NM-1020	Allotte	ee or Tribe Name
Do notuse this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well 21 919) [Oil Well					8. Well Name and No. Echo AWF Federal #1		
2. Name of Operator Echo Production, Inc.			9. API Well 30-015-	No.			
3a. Address PO Box 1210, Grah	(940) 54	3b. Phone No. (include area code) (940) 549-3292			10. Field and Pool, or Exploratory Area Wildcat Mississippian		
4. Location of Well (Footage, Sec. 1250 FNL & 1500	.T., R., M., or Survey Description FWL of Sec 15 T21S	n) 5 R21E (Unit	t C, NEN	W)	11. County of Eddy Co	r Paris	sh, State
12. CHECK AF	PPROPRIATE BOX(ES) T	O INDICATE N			EPORT, OR	OTI	HER DATA
TYPE OF SUBMISSION			TYPE O	F ACTION			
Notice of Intent Subsequent Report Final Abandonment Notice 13. Describe Proposed or Complete	Acidize Alter Casing Casing Repair Change Plans Convert to Injection and Operation (clearly state all perectionally or recomplete horizont the work will be performed or present the state of the state	Deepen Fracture Trea New Construction Plug and Ab Plug Back tinent details, includably give subsurface	at action andon an	Recomplete Temporarily Al Water Disposal	any proposed w	ork an	Water Shut-Off Well Integrity Other Change Operato and approximate duration thereof. all pertinent markers and zones.
following completion of the intesting has been completed. It determined that the site is ready Lease Responsibility	volved operations. If the operation is the operation of t	be filed only after	all requireme	nts, including rec	lamation, have	been o	above subject
Petroleum Corpora	ation, 105 South Fo OCD form C-104A is	urth St., A	rtesia,	NM 88210 /	MAY 3 C LINDA A. A EAU OF LAND ROSWELL FIE) 21. ASKW	IG IAGEMENT
14. I hereby certify that the foregon Name (Printed/Typed)	oing is true and correct		Title	ations Man	agor / V	ice	President
Tom Golden Signature			Operations Manager / Vice President Date 2/27/02				
I am softe	THIS SPACE	FOR FEDERA	L OR STA	TE OFFICE U	SE		
Approved by			Title			Date	
Conditions of approval, if any, a certify that the applicant holds I which would entitle the applicant	abal of countable title to those in	otice does not warrights in the subject	ant or Offic lease	c		·- <u>-:</u>	() California

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