Form 3160-5 (August 1999)

OCD-HOBBS **UNITED STATES** DEPARTMENT OF THE INTERIOR

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

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for prosposals to drill or for e-entire an abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other institutions on reverse size in the state of the st	DOKEAU OF LAND MANAGEN	1EN1 5. L	ease Serial No.
SUBMIN TRELICATE. Other instructions and reverse state 1. Type of Well 2. Name of Operator Echo Production, Inc. 3. Address PO Box 1210, Graham, TX 76450 3. Phone No. finclular area code) PO Box 1210, Graham, TX 76450 3. Phone No. finclular area code) PO Box 1210, Graham, TX 76450 3. Phone No. finclular area code) PO Box 1210, Graham, TX 76450 3. Address PO Box 1210, Graham, TX 76450 3. Phone No. finclular area code) PO Box 1210, Graham, TX 76450 3. DO DO STATE DO ST	SUNDRY NOTICES AND REPORTS	ON WELLS	MNM106916
Type of Well Gas Well Osher R. Well Name and No.	Do not use this form for proposals to drill	or to re-enfor an	Indian, Allottee or Tribe Name
Soliweit Gas Well Other	transcription by the communication of the constraint of the constr	ns on reverse side 7. I	Unit or CA/Agreement, Name and/or No.
2. Name of Operator Echo Production, Inc. 3a. Address PO Box 1210, Graham, TX 76450 3b. Phone No. (Include area code) PO Box 1210, Graham, TX 76450 3b. Phone No. (Include area code) PO Box 1210, Graham, TX 76450 3c. Address Po Box 1210,	• • · · · · · · · · · · · · · · · · · ·		
30	2. Name of Operator		
4. Location of Well (Footage, Sec. T. R. M. or Survey Description) 560' FNL & 330' FEL Sec 31 T22S R32E Lea Co., NM 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION 13. Notice of latent Acidize Casing Repair Casing Plans Casing Repair Casing Plans Plag and Abandour starting due of any proposed work and approximate duration thereof. If the proposal is to depen discretization to file with BLM. Black complete to the sing in substitution of the immoved operations. If the operation of person to design and the substitution of the immoved operations. If the operation of person of person of person of person of person of the work will be performed or provide the Boad No. on the with BLM. Black or in a new interval, a Form 31604 shall be filed only after all recipients or recompleted in a new interval, a Form 31604 shall be filed only after all recipients of the moved of the contained of the substitute		9. /	API Well No.
Livingston Ridge, Delaware 11. County or Parish, State Lea Co., NM	PO Box 1210, Graham, TX 76450 (9	7/11 5/10=2202	
Lea Co., NM		Li	vingston Ridge, Delaware S
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Acidize	31 22 30 31 1225	11. (County or Parish, State
TYPE OF SUBMISSION TYPE OF ACTION Acidize		<u> and the second of the second</u>	and the second of the second o
Notice of Intent Acidize		 	T, OR OTHER DATA
Notice of Intent Alter Casing	TIPE OF SUBMISSION	TYPE OF ACTION	
Subsequent Report Casing Repair	- Marian ext		
Final Abandonment Notice Convert to Injection Plug Back Water Disposal	Subsequent Report Casing Repair	New Construction Recomplete	
Attach the Band under which the work will be performed or provide the Bond No. on file with BLM/BLA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing base been completed. Final Abandonnent Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.) Well was originally staked 660' FNL & 330' FEL. Due to existing road the location had to be moved 100' north. The new location does not change anything on the approved APD. A new rig plat is attached and the pad will be entirely on the area of the original archaeological survey. The proposed well location was discussed with Tiffany Salliyan who confirmed that a new archaeologial survey would not be required. Please expedite approval if possible due to rig scheduling. 14. Ihereby certify that the foregoing is true and correct Name (PrintedTyped) Tom Golden Title Operations Manager Date 1/26/04		· · · · · · · · · · · · · · · · · · ·	
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Name (Printed/Typed) Tom Golden Title Operations Manager Signature Date 1/26/04			1 1 HOLD 22
Name (Printed/Typed) Tom Golden Signature Date 1/26/04			152-575050181 17314141
Signature Operations Manager Date 1/26/04	 I hereby certify that the foregoing is true and correct Name (Printed/Typed) 		
Signature Date 1/26/04	Tom Golden	Title Operations Manag	ger
	Signature Jone Jole		
I DIO OFACE FUR FEDERAL OR STATE OFFICE USE	THIS SPACE FOR I	EDERAL OR STATE OFFICE USE	

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1003 Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 statements or representations as to any matter within its jurisdiction.

D MANAGER

Office CARLSBAD FIELD OFFICE

JAN 2 9 2004

State of New Mexico

DISTRICT I P.O. Box 1980, Hobbs, NM 88241-1980

Energy, Minerals and Natural Resources Department

Form C-102 Revised February 10, 1994 Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

DISTRICT II P.O. Drawer DD, Artesia, NM 88211-0719

DISTRICT IV

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

DISTRICT IV P.O. BOX 2088, SANTA FE, N.M. 87504-2088	WELL LOCATION AND	ACREAGE DEDICATION	N PLAT	□ AMENDED REPOR
API Number 30 -025-36380	Pool Code 39380	Livingston perty Name	Pool Name Ridge	Deleurare -
Property Code 32583		Perty Name CON "31" FEDERAL	7	Well Number
0GRID No. 6742		rator Name DUCTION, INC.		Elevation 3538'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Α	31	22-S	32-E		560'	NORTH	330'	EAST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres	Joint o	r Infill Co	nsolidation	Code Or	der No.			<u> </u>	<u> </u>

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

		O.25 D. THE DIVIDION
45.09 AC LOT 2 45.15 AC LOT 3	GEODETIC COORDINATE NAD 27 NME Y = 492930.0 N X = 693754.4 E LAT. 32'21'13.03"N LONG. 103'42'21.22"W	OPERATOR CERTIFICATION I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief. SEE DETAIL Signature John Thoma Printed Name Petr. Geologist Title 1/26/04 Date SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervison and that the same is true and correct to the best of my belief. January 19, 2004
45.21 AC LOT 4		January 19, 2004 Date Surveyor Signature & Sea 60 Professional Surveyor 04.11.0079 Certificate No. CARY BUSSIN 12641



