Submit 1 Copy To Appropriate District State of New Office Energy, Minerals and		Form C-103 Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	1	WELL API NO. 30-039-23352
811 S. First St., Artesia, NM 88210 OIL CONSERVA1   District III – (505) 334-6178 1220 South St.   1000 Rio Brazos Rd. Aztec. NM 87410 1220 South St.	Francis Dr.	5. Indicate Type of Lease STATE STATE
District IV (505) 476-3460 Santa Fe, N   1220 S. St. Francis Dr., Santa Fe, NM 87505 87505	M 87505	6. State Oil & Gas Lease No. E-1207
SUNDRY NOTICES AND REPORTS ON W (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C- PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Enchilada
1. Type of Well: Oil Well 🛛 Gas Well 🗋 Other		8. Well Number 1
2. Name of Operator Logos Operating, LLC		9. OGRID Number 289408
3. Address of Operator 4001 North Butler Ave, Bldg 7101 Farmington, NM 87401		10. Pool name or Wildcat Counselors Gallup-Dakota
4. Well Location	<u></u> _	
Unit Letter B : 860 feet from the	N line and	1825 feet from theEline
Section 16 Township 23M		NMPM Rio Arriba County
11. Elevation (Show whethe	r DR, RKB, RT, GR, etc.) 6856' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK D PLUG AND ABANDON		SEQUENT REPORT OF:
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A		
OTHER:	OTHER: 🛛 Red	leliverv
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
The Enchilada 1 was tied into the Enchilada CDP with the Enchilada 2X.		
This well was redelivered on 8/26/14 @ 11:45hr after being down more than 90 days waiting on tubing repair, then tied into CDP. TP: RODS, CP: 80, Initial MCF: 62mcf		
GAS Co.: BeeLine, METER No.: 31709		RCVD AUG 28 '14
		OIL CONS. DIV.
		DIST. 3
Spud Date: Rig Relea	se Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE		
Type or print nameTamra Sessions E-mail address:tsessions@logosresourcesllc.com PHONE: _505-330-9333 For State Use OnlyACCEPTED FOR RECORD		
APPROVED BY:		DATE
Conditions of Approval (if any):		
、 <b>TV</b>		