

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: January 31, 2018

RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. NMNM 136672

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

NMNM 138467

8. Well Name and No. Agape 2307 07P Com 2H

9. API Well No. 30-039-31367

10. Field and Pool or Exploratory Area
Basin Mancos / Lybrook Gallup

11. Country or Parish, State
Rio Arriba County, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator LOGOS Operating, LLC

3a. Address 2010 Afton Place
Farmington, NM 87401

3b. Phone No. (include area code)
(505) 324-4145

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1283' FSL & 317' FEL, SE/SE, P Sec 7 T23N R07W

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Name Change
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Please disregard previous name change (Agape 2307 07P Com 2H) sundry dated 4/30/19. LOGOS requests to change the well name to Montezuma 2307 07P Com 2H. See attached C-102.

NMOCD

127 2019

CRICT III

New property code: 325817

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Tamra Sessions

Title Regulatory Specialist

Signature

Tamra Sessions

Date

06/26/2019

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Dave Mankiewicz

Title AFM-Min

Date 6/26/19

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.

Office FFO

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.

(Instructions on page 2)

Effective date of change
NMOCD Ar 7-1-19

4

DISTRICT I
1625 N. French Dr., Hobbs, N.M. 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II
811 S. First St., Artesia, N.M. 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

DISTRICT III
1000 Rio Brazos Rd., Aztec, N.M. 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☒ AMENDED REPORT
AS-DRILLED PLAT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-039-31367	² Pool Code 97232/42289	³ Pool Name BASIN MANCOS/LYBROOK GALLUP
⁴ Property Code 325817	⁵ Property Name MONTEZUMA 2307 7P COM	⁶ Well Number 2H
⁷ OGRID No. 289408	⁸ Operator Name LOGOS OPERATING, LLC	⁹ Elevation 7267

¹⁰ Surface Location

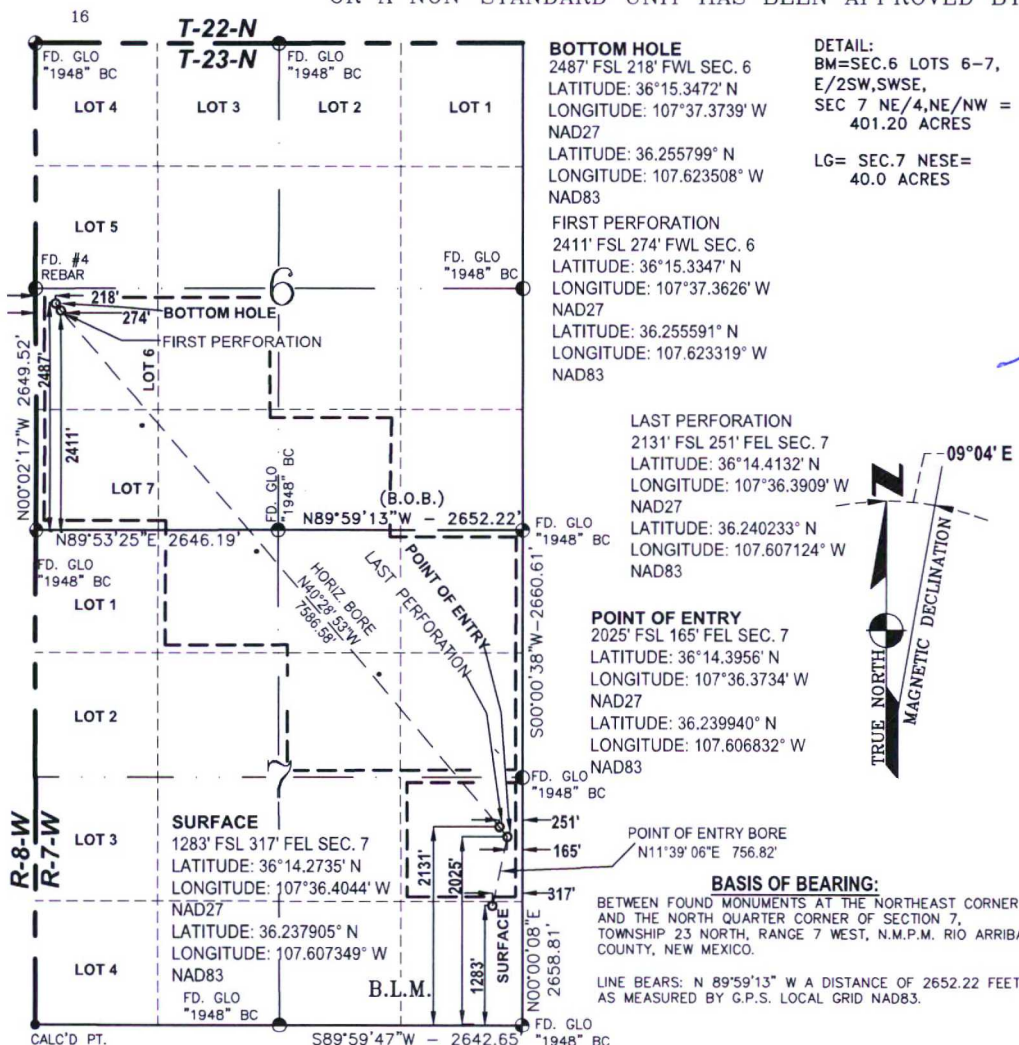
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	7	23-N	7-W		1283	SOUTH	317	EAST	RIO ARRIBA

¹¹ 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
LOT 6	6	23-N	7-W		2487	SOUTH	218	WEST	RIO ARRIBA

¹² Dedicated Acres PROJECT AREA 441.20 ACRES SEE DETAIL BELOW	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or a working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Tamra Sessions 6/26/19
Signature Date
Tamra Sessions
Printed Name
tsessions@logosresourcesllc.com
E-mail Address

18 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 supervision, and that the same is true and correct to the best of my belief.

DECEMBER 12, 2018

Date of Survey

Signature and Seal of Professional Surveyor



GLEN W. RUSSELL
Certificate Number 15703

RECEIVED

Form 3160-5
(June 2015)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
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☒ Oil Well ☐ Gas Well ☐ Other

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LOGOS requests to change the well name from Federal 2307 Com 2H to Agape 2307 Com 2H. See attached C-102.

NMOC

MAY 23 2019

DISTRICT III

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Tamra Sessions

Regulatory Specialist

Title

Signature

Tamra Sessions

Date

04/30/2019

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Dave Mankiewicz

Title

AFM

Date

5/21/2019

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Office

FFO

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NMOC

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1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

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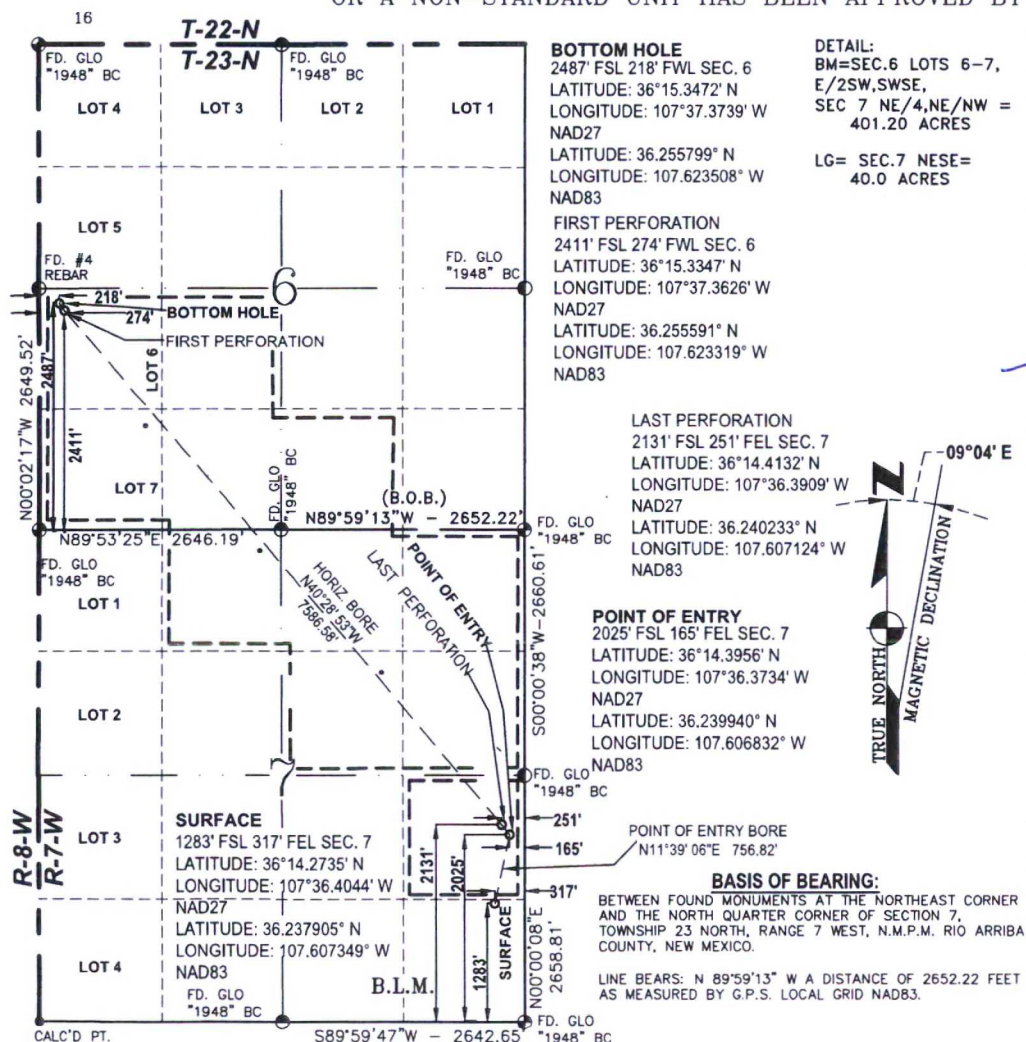
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Signature _____

Date _____

Tamra Sessions

Printed Name _____

tsessions@logosresourcesllc.com

E-mail Address

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GLEN W. RUSS

Certificate Number

15703