

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-045-35911
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VC-0472
7. Lease Name or Unit Agreement Name KTB 2408 32A Com
8. Well Number 001H
9. OGRID Number 289408
10. Pool name or Wildcat Nageezi Gallup
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 7002

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
LOGOS Operating, LLC

3. Address of Operator
2010 Afton Place, Farmington NM, 87401

4. Well Location
 Unit Letter A : 1179' feet from the FNL line and 346' feet from the FEL line
 Section 32 Township 24N Range 08W NMPM County San Juan

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" type="checkbox"/>	

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.

NMOCD
SEP 06 2019
DISTRICT III

First delivered oil on 8/6/19.
 TP: 500, CP:826, Initial Oil: 19bbls
 Oil Co.: Whiptail, LACT Meter No.: 100076

First delivered gas on 8/16/19 @ 09:25hr.
 TP: 124, CP: 655, Initial MCF: 1848mcf
 Gas Co.: Whiptail, Meter No.: 120076

Spud Date: Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Marie E. Florez TITLE Regulatory Specialist DATE 09/5/2019

Type or print name Marie E. Florez E-mail address: mflorez@logosresourcecell.com PHONE: 505-787-2218

For State Use Only ACCEPTED FOR RECORD

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): AV