Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIORS BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014

SUNDRY NOTICES AND REPORTS ON WELLES 17 2012

5. Lease Serial No. Jicarilla Tribal #424

6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to re-enter an ... Jicarilla Apache

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	Use Form 3160-3 (A			alsignanei	nen-	KCVU NUV 1 IZ	
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agre	DIST. 3	
1. Type of Well					0151.0		
☑ Oil Well ☐ Gas W	-		8. Well Name and No Logos #1),			
Name of Operator Logos Capital Management, LLC					9. API Well No. 30-043-21119		
			Phone No. (include area code)		10. Field and Pool or Exploratory Area		
4001 North Butler, Building 7101 Farmington, New Mexico 87401	505-436-262	505-436-2627			Venado Mesa Verde 62490		
4. Location of Well (Footage, Sec., T., I 1610' FNL & 1710' FWL Section 5, Township 22N, Range 5W	1)	4		11. County or Parish, State Sandoval, New Mexico			
12. CHEC	K THE APPROPRIATE BO	OX(ES) TO IND	DICATE NATUI	RE OF NOTIC	CE, REPORT OR OTH	IER DATA	
TYPE OF SUBMISSION				TYPE OF ACTION			
Notice of Intent	Acidize Deepen		en	Production (Start/Resume)		☐ Water Shut-Off	
Notice of Intent	Alter Casing		Fracture Treat		imation	Well Integrity	
	Casing Repair	Casing Repair New Construction		Reco	mplete	Other Mesa Verde	
Subsequent Report & Ø			and Abandon		oorarily Abandon	Completion	
Final Abandonment Notice	Convert to Injection	— "	ug Back		r Disposal		
9/25/12 Rigged up wireline. Set a 5-the well, rigged down wireline. Wait 10/1/2012: MIRU workover unit. TIH-10/2/2012: Swab test and recovered 10/5/2012: TIH with packer and RBI 10/6/2012: MIRU Baker and pump a Swab back 25 bbls of load. SDFN. 10/8/2012: SITP and SICP are 0, wirely with the state of the	on workover rig. I with tubing. RU swab ud 75 BW, 1.5 BO, and no and isolate perforations acid breakdown job on perell went on vacuum. Swalite bridge plug at 4480'. 5170'. Well started making orill out and push down to and TIH. Set EOT @ 490 or. Hang well on. Turn we	nit and swab 8 gas. from 3750'-40 rfs from 3750-4 b and recovere Continue clean g heavy sand 6 6489' and cle 94' with SN @ 4 eli over to prod	5 BW. 158. 4058'. Pumped ed remaining lo ning down to p Clean down to an out to 6500 4866'. Set tubi	d 500 gal of pad (15 BBLS lug @ 5170' to CBP @ 55	15%HCl with 50 bio : 6) with little oil show.	sealers and 30 bbls of water. Swabbed well dry. TOOH with and push down 15'.	
14. I hereby certify that the foregoing is true and correct. Name (Printed		rd/Typed)	pped)				
Kristy Graham			Title Director of Administra		ration and Engineeri	ng Support	
Signature That Q	yr	<u></u>	Date 10/18/2	2012		ACCOUNT TO THE STATE OF THE STA	
	THIS SPACE	FOR FEDE	RAL OR ST	TATE OFF	ICE USE		
Approved by						NOV 0 1 ZUIZ	
Conditions of approval, if any, are attached that the applicant holds legal or equitable ti entitle the applicant to conduct operations to Title 18 LLS.C. Section 1001 and Title 43 to	tle to those rights in the subjection.	et lease which we	ould Office	and willfully t		BY Lor access of the United States are false	

(Instructions on page 2)

fictitious or fraudulent statements or representations as to any matter within its jurisdiction.