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Form 3160-5
(March 2012)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FEB 15 2013

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014Farmington Field Office
SUNDRIY 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.
NM 109399

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well☐ Gas Well☐ Other2. Name of Operator
Logos Operating, LLC3a. Address
4001 North Butler Avenue, Building 7101
Farmington, NM 874013b. Phone No. (include area code)
505-436-26274. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1662' FNL, 1973' FEL
Section 8, T23N, R8W, UL G

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

8. Well Name and No.
Logos #69. API Well No.
30-045-3542210. Field and Pool or Exploratory Area
Basin Dakota - Nageezi Gallup11. County or Parish, State
San Juan County, NM

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"/> Fracture Treat	<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 Casing Change
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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.)

Logos Operating, LLC is requesting approval to make the following changes to the casing program for the Logos No. 6:

-Running 9-5/8" 36#, J-55 8rd LTC surface casing instead of 8-5/8" surface casing.

-Running 5-1/2" 15.5#, L-80 production casing instead of 5-1/2" 15.5#, J-55 production casing.

RCVD FEB 21 '13
OIL CONS. DIV.
DIST. 3

CONFIDENTIAL

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

Kristy Graham

Title Director of Administration and Engineering Support

Signature

Date 02/15/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

William Tambekou

Title Petroleum Engineer

Date 02/19/2013

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 FFD

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)

NMOCDA