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Form 3160-5
(June 2015)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCT 02 2018
FORM APPROVED
OMB No. 1004-0137
Expires: January 31, 2018

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.

Farmingington Field Office
Bureau of Land Management

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.
CA NMNM 138467
8. Well Name and No. Federal 2307 7P Com 3H
9. API Well No. 30-039-31368
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) 787-2218
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1288 FSL & 337 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	BOP Test Variance	
	<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 recomplate 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 perfonned 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 recompletion 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 detennined that the site is ready for final inspection.)

LOGOS is requesting variance to ask permission not to do a full BOP Test but to do a BOPE Shell Test for flanges that are broke for rig skid.

For Rig Aztec #920

To Shell Pressure Test Braden Head & BOP at 2,000psi High and 250psi Low. Pressure test the surface or intermediate casing at 1,500psi for 30min. Following successful pressure tests, will spud the intermediate or production hole. The Last Full Long Test and Function on the first well of this well pad will be conducted approximately 10/10/18 and will be reported on subsequent sundry with actual date.

ENTERED
OCT 3 2018
AFMSS

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Tamra Sessions
Title Regulatory Specialist
Signature *Tamra Sessions*
Date 10/01/2018

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *Vigil James*
Title SPET
Date 10/3/18
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)

NMOCDAY