

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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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.

5. Lease Serial No. **NMNM136672**
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

7. If Unit of CA/Agreement, Name and/or No.
NMNM 138467

8. Well Name and No. **Federal 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

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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	Production Casing Report
	<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 recompletable 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 recompletable 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.)

11/8/18 RU NU BOP.
 11/9/18 PSI test BOP. PSI tested 7" casing @ 1500psi for 30mins - Good Test. MU bit. TIH, to DV tool @ 2887'. RIH, f/ 2889' & tagged cmt @ 5340'. Drill thru shoe track @ 6270'. Circ., & CO. POOH.
 11/10/18 - 11/11/18 PU BHA & directional tools. TIH tagged @ 1833'. DO & CO f/ 1865' - 4588'. Continue to drill 6-1/8" production lateral f/5790' - 6340'. Drill w/ 6-1/8" bit to f/6340' - 9870'. Drill f/ 9870' to 10772'. Circ, CO. Rig Service.
 11/12/18 Continue to drill f/ 12040' to TD 6-1/8" hole @ 13863' TMD, 5812' TVD at 15:00hr on 11/12/18. Circ, & CO. POOH.
 11/13/18 RU casing crew. RIH w/186jts 4-1/2" 11.6#, P-110, LT&C liner & set @ 13858' w/FC @ 13813', LC @ 13811', Alpha tool @ 13766. TOL @ 6113'. Circ. RD casing crew.
 11/14/18 RU cementers. Pre-flushed w/20bbls FW, 40bbls Tuned Spacer III. Pumped 710sx (172bbls, 966cf) Extendacem cmt. Displaced w/193bbls w/ MMCR, FW & 2%KCL. Bumped plug @ 04:21hr on 11/14/18. Circ., 30bbls cmt to surface. RD cementers. POOH. ND BOPE. Install tubing head B section.
 11/15/18 RU casing crew. RIH, w/ tieback string 146jts, 4-1/2", 11.6#, P-110 and tieback @ 6113'. Land on mandrell 35K & 30K on seal assembly. Pressure test 4-1/2" @ 1500psi/30min, good test. ND BOP. Released from Drilling @ 05:32hrs.

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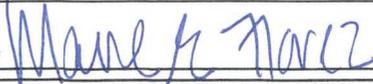
FARMINGTON FIELD OFFICE

By: 

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

DISTRICT III

Title **Regulatory Specialist**

Signature 

Date **11/20/2018**

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

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 _____

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)

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