

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

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.)		WELL API NO. 30-045-35913
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator LOGOS Operating, LLC		6. State Oil & Gas Lease No. VC - 0472
3. Address of Operator 2010 Afton Pl, Farmington NM 87401		7. Lease Name or Unit Agreement Name State 2408 32A Com
4. Well Location Unit Letter <u>A</u> : <u>1232</u> feet from the <u>FNL</u> line and <u>374</u> feet from the <u>FEL</u> line Section <u>32</u> Township <u>24N</u> Range <u>08W</u> NMPM County <u>San Juan</u>		8. Well Number <u>003H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>7002'</u>		9. OGRID Number <u>289408</u>
		10. Pool name or Wildcat <u>Nageezi Gallup</u>

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

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

6/15/19 Walk AD1000 from State 1H. NUBOP PU BHA. TIH t/2495', shell test BOP. Test 7" casing @1500psi for 30mins - Good Test. RIH to 6160'. DO shoe & CO cmt t/6245'.

6/16/19 Drill 6-1/8" production lateral, circ & sweep as needed, f/6245 - to TD 11514' TMD, 5551' TVD @ 23:59hr on 6/16/19, 6/17/19 Circ, & CO. POOH. LD directional tools.

6/17/19 RU casing crew. RIH w/130jts 4-1/2" 11.6#, P-110, BT&C liner & land @ 11500' w/FC @ 11473', LC @ 11472', Alpha tool @ 11426'. TOL @ 6066'. Circ. RD casing crew.

6/18/19 RU cementers. Pre-flushed w/40bbbs Tuned Spacer. Pumped 494sx (120bbbs, 672cf) Extendacem cmt. Displaced w/149bbbs KCL. Bumped plug @ 03:39hr on 6/18/19. Circ., 8bbbs cmt to surface. RD cementers. POOH. ND BOP.

Pressure test will be reported on the next sundry. ✓

Rig Release date?

Spud Date:

Rig Release Date:

NMOCD

JUL 01 2019

DISTRICT III

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

SIGNATURE Tamra Sessions TITLE Regulatory Specialist DATE 6/28/2019

Type or print name Tamra Sessions E-mail address: tsessions@logosresourcesllc.com PHONE: 505-787-2218
For State Use Only

APPROVED BY: [Signature] TITLE SUPERVISOR DISTRICT #3 DATE 7/10/19
 Conditions of Approval (if any): AY