

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

WELL API NO. 30-039-31195
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-1207
7. Lease Name or Unit Agreement Name NCRA State
8. Well Number 8P
9. OGRID Number 289408
10. Pool name or Wildcat Devils Fork Gallup
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6769' GL

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator **Logos Operating, LLC**

3. Address of Operator **4001 North Butler Ave, Bldg 7101
Farmington, NM 87401**

4. Well Location
 Unit Letter **P** : **888** feet from the **S** line and **470** feet from the **E** line
 Section **16** Township **24N** Range **06W** NMPM **Rio Arriba** County

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

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

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.

6/6/16 MIRU AWS 395. Pick up on rods, stuck pump, sheared off, TOH w/rods. NDWH, NUBOP, unset anchor, RIH w/slickline. Work paraffin 300' to 3000' with 60bbls hot KCL water. Make swab run. Punch hole in tbg at 6100' w/slickline, flush 30bbls hot KCL water down tbg. TOH w/tbg., replace 2jts.

6/7/16 RIH w/ 190jts 2-7/8" 6.5# J-55 tbg & land at 6228' (new landing depth) w/SN @ 6198'. Flush 20bbls KCL down tbg. Make 2 swab runs clean returns. TIH w/new pump 1 1/4" RHAZ-Z HVR and rods. Load tbg with 35bbl KCL, pressure test 600#, good test. Stroke pump, stack out. RDRR @ 17:30hr on 6/7/16.

OIL CONS. DIV DIST. 3

JUN 13 2016

Spud Date:

Rig Release Date:

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

SIGNATURE Tam Sessions TITLE Regulatory Specialist DATE 06/08/2016

Type or print name Tamra Sessions E-mail address: tsessions@logosresourcesllc.com PHONE: 505-330-9333

For State Use Only

APPROVED BY: [Signature] TITLE DEPUTY OIL & GAS INSPECTOR DATE 6/28/16
 Conditions of Approval (if any): AV