

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

RECEIVED

SEP 20 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.*

Farmington Field Office  
Bureau of Land Management

**SUBMIT IN TRIPLICATE** - Other instructions on page 2

|  |   |  |
|--|---|--|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other |   | 5. Lease Serial No. NMSF 077972 C                              |
| 2. Name of Operator LOGOS Operating, LLC   |   | 6. If Indian, Allottee or Tribe Name                           |
| 3a. Address 2010 Afton Place<br>Farmington, NM 87401   | 3b. Phone No. (include area code)<br>(505) 787-2218 | 7. If Unit of CA/Agreement, Name and/or No.<br>NMNM 118082     |
| 4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)<br>660 FSL & 795 FEL, SE/SE, P Sec 02 T27N R13W             |   | 8. Well Name and No. Richardson 100                            |
|  |   | 9. API Well No. 30-045-31915                                   |
|  |   | 10. Field and Pool or Exploratory Area<br>Basin Fruitland Coal |
|  |   | 11. Country or Parish, State<br>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 type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen               | <input checked="" 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 type="checkbox"/> Other          |
|   | <input 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 recompleate 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 recompleation 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.)

NMOCD

DEC 20 2018

The following well was shut in more than 90 days due to down hole issues and re-delivered on 9/14/2018.  
Per 43 CFR 3163.1 & Violation 43 CFR 3163.2(e)(2).

ACCEPTED FOR RECORD

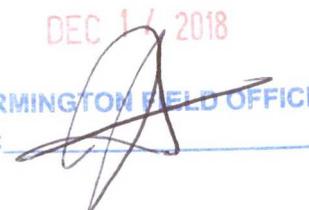
DISTRICT III

Tubing PSI: 0  
Casing PSI: 24  
Line PSI: 94  
MCF: 25

DEC 17 2018

Meter No.: 91150-01  
Transporter: Enterprise

FARMINGTON FIELD OFFICE

By: 

|  |                       |
|--|-----------------------|
| 14. I hereby certify that the foregoing is true and correct. Name (Printed Typed)<br>Marie E. Florez | Regulatory Specialist |
| Signature         | Title                 |
|  | Date 09/20/2018       |

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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