

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

RECEIVED

DEC 10 2018

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Serial No. NMNM136672
2. Name of Operator LOGOS Operating, LLC	6. If Indian, Allottee or Tribe Name
3a. Address 2010 Afton Place Farmington, NM 87401	7. If Unit of CA/Agreement, Name and/or No. NMNM 138467
3b. Phone No. (include area code) (505) 787-2218	8. Well Name and No. Federal 2307 07P Com 3H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1288 FSL & 337 FEL, SE/SE, P Sec 07 T23N R07W	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

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

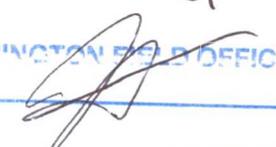
TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 recomple 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 recomple 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.)

11/3/18 NU BOP. PSI test BOP. PSI tested 7" casing @ 1500psi for 30mins - Good Test. PU BHA & directional tools. TIH tagged @ 1800'. DO & CO cmt f/ 1800' - 6300'. Displaced w/ FW.  
 11/4/18 - 11/5/18 Drill 6-1/8" production lateral f/6490' - 7410'. Continue directional drill w/ 6-1/8" bit to 7439'-8279'. Drill f/ 8530' to 10928'. Circ. CO. Wash & ream.  
 11/6/18 Continue to drill f/ 11531' to TD 6-1/8" hole @ 13441' TMD, 5782' TVD at 01:00hr on 11/6/18. Circ. & CO.  
 11/7/18 POOH. LD BHA & directional tools. RU casing crew. RIH w/173jts 4-1/2" 11.6#, P-110, LT&C liner & set @ 13428' w/FC @ 13386', LC @ 13384', Alpha tool @ 13338. TOL @ 6280'. Circ. RD casing crew.  
 11/8/18 RU cementers. Pre-flushed w/10bbbs FW, 40bbbs Tuned Spacer. Pumped 335sx (81bbbs, 455cf) Extendacem cmt followed by 330sx (80bbbs, 449cf) Extendacem cmt. Displaced w/185bbbs w/ MCCR &KCL. Bumped plug @ 08:08hr on 11/8/18.  
 Circ.,30bbbs cmt to surface. RD cementers. POOH. ND BOPE. Released from Drilling @ 16:00hrs.

Pressure test on the 4 1/2" casing will be conducted prior to completions.

FARMINGTON FIELD OFFICE

By: 

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Marie E. Florez	Title Regulatory Specialist
Signature 	Date 12/10/2018

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)

NMOCDA