

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

Amended Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-045-35912
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VC - 0472
7. Lease Name or Unit Agreement Name State 2408 32A Com
8. Well Number 002H
9. OGRID Number 289408
10. Pool name or Wildcat Nageezi Gallup
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 7002'

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 **NMOC D**

2. Name of Operator
LOGOS Operating, LLC

3. Address of Operator
2010 Afton Pl, Farmington NM 87401

4. Well Location
 Unit Letter A : 1205 feet from the FNL line and 360 feet from the FEL line
 Section 32 Township 24N Range 08W NMPM County San Juan
DISTRICT III

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: Production Casing <input checked="" type="checkbox"/>	

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.

6/8/19 Walk AD1000 from State 1H. NUBOP PU BHA. TIH drill DV tool up, circ 800stks. PSI tested 7" casing & BOP @ 1500psi for 30mins - Good Test. TOOH, PU MWD tool TIH to 6150'RIH. DO & CO cmt f/ 6150' - 6226'. Drill 6-1/8" production lateral, circ & sweep as needed, f/6300' - to TD 11465' TMD, 5568' TVD @ 16:30hr on 6/9/19. Circ, & CO. POOH. LD directional tools.
 6/10/19 RU casing crew. RIH w/128jts 4-1/2" 11.6#, P-110, BT&C liner & land @ 11465' w/FC @ 11420', LC @ 11418', Alpha tool @ 11372'. TOL @ 6064'. Circ. RD casing crew.

RU cementers. Pre-flushed w/40bbls Tuned Spacer. Pumped 492sx (119bbls, 668cf) Extendacem cmt. Displaced w/153bbls FW. Bumped plug @ 00:20hr on 6/11/19. Circ. 19bbls cmt to surface. RD cementers. POOH. ND stack. PU BOP.
 Rig Release @ 07:00hr on 6/11/19. ✓
 Prepare to skid to State 1H. Pressure test will be reported on the next sundry. ✓

Spud Date:

Rig Release Date:

NMOC D
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 6/27/2019

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): AV