

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. 30-039-26788
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator LOGOS Resources, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 2010 Afton Place, Farmington NM 87401		7. Lease Name or Unit Agreement Name Rosa Unit
4. Well Location Unit Letter <u>G</u> : <u>1380'</u> feet from the <u>FNL</u> line and <u>2450'</u> feet from the <u>FEL</u> line Section <u>32</u> Township <u>31N</u> Range <u>05W</u> NMPM County <u>Rio Arriba</u>		8. Well Number <u>26B</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>6540'</u>		9. OGRID Number 289408
10. Pool name or Wildcat Basin Dakota		

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: Redelivery <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.

The following well was shut in more than 90 days due to excessive water production and redelivered on 9/25/2019.

Tubing PSI: 325
 Casing PSI: 532
 Line PSI: 50
 Initial MCF: 38

Meter: 83391
 Transporter: Harvest

NMOCD
OCT 02 2019
DISTRICT III

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 Marie E. Florez TITLE Regulatory Specialist DATE 09/27/2019

Type or print name Marie E. Florez E-mail address: mflorez@logosresourcesllc.com PHONE: 505-787-2218

For State Use Only

APPROVED BY: Accepted for Record TITLE _____ DATE _____
 Conditions of Approval (if any): AV