

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED

AUG 16 '90

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

L.G. 7444

7. Lease Name or Unit Agreement Name

MANNES STATE

8. Well No.

1-35

9. Pool name or Wildcat

WILDCAT

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

ROBERT J. MANNES

3. Address of Operator

P. O. BOX 1918, HOLLAND, MI 49422-1918

4. Well Location

Unit Letter J : 1980 Feet From The SOUTH Line and 1800 Feet From The EAST Line

Section 35

Township 3S

Range 27E

NMIM

CHAVES

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4089 GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☒

OTHER: ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

RAN 1795' OF 8-5/8" 24# J-55 CASING TO 1795'. CEMENTED
W/400 LT. + 15# SALT + 1/4# FLO-CELE, 11" HOLE ON 2-14-90. (HALLIBURTON)
TESTED W/1000# PSI FOR 30 MINUTES ON 2-14-90. TESTED O.K.

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

SIGNATURE Robert J. Mannes

TITLE

DATE 7-24-90

TYPE OR PRINT NAME ROBERT J. MANNES

TELEPHONE NO. 616-396-1445

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY

DATE

JUL 29 1991

CONDITIONS OF APPROVAL, IF ANY: