| NO. OF COPIES RECEIVED                           |            | 4           |                                                                                                                        |                                    | Form C-103<br>Supersedes Old                      |
|--------------------------------------------------|------------|-------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------|
| DISTRIBUTION                                     |            |             |                                                                                                                        |                                    | C-102 and C-103                                   |
| SANTA FE                                         | $\angle 1$ |             | NEW MEXICO OIL CONSERVA                                                                                                | TION COMMISSION                    | Effective 1-1-65                                  |
| FILE                                             | I/I        |             | n                                                                                                                      | ECEIVED                            |                                                   |
| U.S.G.S.                                         |            |             | T.                                                                                                                     | K. C. L. I V L.                    | Sa. Indicate Type of Lease                        |
| LAND OFFICE                                      |            |             |                                                                                                                        |                                    | State X Fee                                       |
| OPERATOR                                         | 7          |             |                                                                                                                        | NOV - 6 1978                       | 5. State Oil & Gas Lease No.                      |
| 8418                                             | 7          |             |                                                                                                                        |                                    | B 9646                                            |
|                                                  | SUN        | IDRY        | Y NOTICES AND REPORTS ON WELL POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO ON FOR PERMIT -" (FORM C-101) FOR SUCH PROP | A DIFFERENT RESERVOIR.             |                                                   |
| OIL GAS WELL WELL                                | . 🗆        |             | OTHER- W.I.W.                                                                                                          | ,                                  | 7. Unit Agreement Name                            |
| 2. Name of Operator<br>Shenandoah                | 0i1        | Со          | rporation                                                                                                              |                                    | 8. Farm or Lease Name<br>Monterrey State          |
| 3. Address of Operator P. O. Box                 | <br>4534   |             | Odessa, Texas 79760                                                                                                    |                                    | 9. Well No.                                       |
| 4. Location of Well                              |            |             | 990 S                                                                                                                  | 2310                               | 10. Field and Pool, or Wildcat Shugart (Y,SR,Q,G) |
| UNIT LETTER                                      | ·          |             | 32 TOWNSHIP                                                                                                            |                                    |                                                   |
| THE                                              | INE, S     | ECTION      | 15. Elevation (Show whether DF, R)                                                                                     |                                    | 12. County                                        |
|                                                  |            |             | 35. Elevation (show whether Dr., R.)                                                                                   | 1, OK, etc.)                       | Eddy                                              |
| 16.                                              | 777        | 777         |                                                                                                                        |                                    |                                                   |
|                                                  |            |             | appropriate Box To Indicate Nature TENTION TO:                                                                         |                                    | report of:                                        |
| Γ-                                               | ו          |             | PLUG AND ABANDON REME                                                                                                  | EDIAL WORK                         | ALTERING CASING                                   |
| PERFORM REMEDIAL WORK                            | 1          |             |                                                                                                                        | MENCE DRILLING OPNS.               | PLUG AND ABANDONMENT                              |
| TEMPORARILY ABANDON                              | ╡          |             | <del></del>                                                                                                            | NG TEST AND CEMENT JOB             |                                                   |
| PULL OR ALTER CASING                             | J          |             |                                                                                                                        | THER Bradenhead Tie                | In X                                              |
| OTHER                                            |            |             |                                                                                                                        |                                    |                                                   |
| <del>4. 42</del>                                 |            |             |                                                                                                                        |                                    |                                                   |
| 17. Describe Proposed or Co work) SEE RULE 1903. | mplete     | ed Ope      | erations (Clearly state all pertinent details, an                                                                      | id give pertinent dates, including | estimated date of starting any proposed           |
|                                                  | Tied       | l br        | adenhead to surface with va                                                                                            | lve exposed.                       |                                                   |
|                                                  |            |             |                                                                                                                        |                                    |                                                   |
| 18. I hereby certify that the                    | inform     | ation<br>L. | above is true and complete to the best of my k                                                                         |                                    | CO DATE November 3, 1978                          |
| BW                                               | ,          |             |                                                                                                                        |                                    |                                                   |
| APPROVED BY BU                                   | LU.        | eai         | ler TITLE F1                                                                                                           | e/d                                | DATE 11-1-78                                      |