DISTRIBUTION	ED S	Form C-103
SANTA FE	NEW HEYICO OU CONSERVATION DOWN	Supersedes Old C-102 and C-103
FILE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-55
U.S.G.S.		Ed Indiana Transfer
LAND OFFICE		State Fee
OPERATOR		1
		5. State Oil & Gas Lease No.
	SUNDRY NOTICES AND REPORTS ON WELLS	mmmmmm
(DO NOT USE TH	SUNDRY NOTICES AND REPORTS ON WELLS IS 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.	GAS []	7. Unit Agreement Name
2. Name of Operator	WELL OTHER-	
1	McCoy & Phillips	8. Farm or Lease Name
Bediord, 3. Address of Operator	Inc. Agent for & State of New Mexico	John Bergin
	E Familia to W M Control	9. Well No.
4. Location of Well	E, Farmington, New Mexico 87401	1
<u> </u>	2515	10. Field and Pool, or Wildcat
UNIT LETTER	25/5 FEET FROM THE No 1410 FEET FROM	Pleanfiell Farming to
I W	21 2011 1111	
THE	LINE, SECTION 21 TOWNSHIP 29N RANGE 11W NMPM.	
THITTITI	15. Elevation (Show whether DF, RT, GR, etc.)	
		12. County
16.	Check Appropriate Pow To Latin All Check Appropriat	San Juan
NC	Check Appropriate Box To Indicate Nature of Notice, Report or Oth	ier Data
	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
	OTHER	
OTHER		
17 Describe Prenegad a		
work) SEE RULE IT	r Completed Operations (Clearly state all pertinent details, and give pertinent dates, including 03.	estimated date of starting any proposed
This well	has been plugged & abandoned as follows:	
THE WELL	nds been prugged & abandoned as follows:	
8-15-78	Move in rig rig up due nit hit	
	Move in rig, rig up, dug pit, hit water @4' Ran 1 jt. 2 3/8" tbg & tagged plug @ 15' Cut surface casing off 3' under surface	
8-16-78	Cut surface casing off 3' under surface	
	rig down, fill pit.	
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		A Secretary of the Secr
		- 1 850. " ** (IR) 1
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		- \ _i, 69% 5 / -
		Your Dia.
		The second secon
18. I hereby certify that +1	ne information above is true and complete to the best of my knowledge and belief.	
, //	true and complete to the best of my knowledge and belief.	
	a Agent for State	0 21 72
SIGNED	TITLE MOUNT TO STATE	8-31-78
1 0		. *
APPROVED BY	Kondial State	
~~~	TITLE TITLE	DATE
CONDITIONS OF APPRO	VAL,UF ANY:	