

	Fm	Pm	N	Pc
22-26 C	XX	XX	XX	

1. Date:		8/27/2013	
2. Type of Well:			
Oil:		XX	Gas:
3. County:		LEA	

TO BE COMPLETED BY DISTRICT GEOLOGIST			
17. Action taken	18. Pool Name	Pool ID num	
EXTEND	TRIPLE X;BONE SPRING, WEST	96674	
T 23 S, R 33 E	T 24 S, R 32 E	T 24 S, R 33 E	
SEC 31: All	SEC 12: E/2	SEC 5: All	SEC 16: W/2
		SEC 6: NE/4 and W/2	SEC 21: All
		SEC 7: All	SEC 22: All
		SEC 8: All	
		SEC 9: W/2	

~~May 2005--ODS-TRI43080-15~~

OCT 07 23 13