

REFERENCE SHEET FOR UNDESIGNATED WELLS

1. Date:	9/18/01
2. Type of Well:	Oil Well Gas Well
3. County:	Lea

4. Operator Name:		API NUMBER	
Trilegy Operating Inc		30-025-35568	
5. Address of Operator:			
PO Box 2606 Midland TX 79708			
7. Lease name of Unit Agreement Name:		7. Well No.	
Sapphire		1	
8. Well Location			
Unit Letter	G	2310 feet from the	N line and 1650 feet from the
			E line
Section	24	Township	19S Range 38E NMPM
9. Completion Date:		11. Perfs	
8/31/01		top	
		7296	
		bottom	
		7577	
10. Name of Producing Formation:		12. Open Hole casing shoe	
Abo		PBTD or TD	
		7650 / 8000	
14. C-123 Filed:		15. Name of Pool Requested:	
		Nadine Drinkard-Abo	
		<47510>	
16. Remarks			
Ext			

TO BE COMPLETED BY DISTRICT GEOLOGIST											
17. POOL NAME									18. POOLID #		
T	S	R	E	T	S	R	E	T	S	R	E
Sec				Sec				Sec			
Sec				Sec				Sec			
Sec				Sec				Sec			

19. ADVERTISED FOR HEARING:		20. CASE NUMBER:	
21. Name of pool for which was advertised.			
22a. Placed in Pool		22b. By order number	