OPERATOR _____ LEASE & WELL NO. _____

POOL _____ LOCATION _____

ELEV. _____ TD _____ STATE _____ FEDERAL _____

PROD. &/OR INJ. INT. & ZONE _____

DAILY PROD. &/OR INJ. WITH PRESSURE _____

	Size Hole	Casing Size	Casing Depth	Cement Amount & Kind	Cement Top	Csg/Tbg Pressure
COND.						
SUR.						
INT.						
PROD.						
LINER						

REMARKS: _____

_____

T.A. _____

T.X. _____

B.X _____

T.DEL.LI _____

T.DEL.SD. _____

T.Y _____

T.SR _____

T.Q _____

T.PENROSE _____

T.GB. _____

T.PREMIER _____

T.SA _____

T. GLO _____

T.BLBY _____

T.C.F _____

T.T _____

T.FULL _____

T.DR. _____