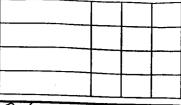


REFERENCE SHEET FOR UNDESIGNATED WELLS



1. Date:	7/18/16	
2. Type of Well Oil Well	l: Gas Well	
3. County;	Lea	

4.	Operator Name:	<i>A</i> .		ADVANTA CORPO
l ''	Hacia	EYates Co		API NUMBER
<u> </u>	Carvey	clates co		30-025-27069
5.	Address of Operator	•		
	000.00	100 00 /011 1/00	30.00	
	PH Box 19		582 <i>02</i>	
7.	Lease name or Unit	Agreement Name:		7. Well No.
	Federa	1 30		1
8.	Well I continu			
	Unit Letter	: 1980 feet from the <u>S</u>	line and 1100	_feet from the $\mathcal E$ line
				_teet from theline
	Section	30 Township 193	Range 33e NMPM	
19.	Completion Date:		11 D- 6	
9.	Completion Date:	a / /	11. Perfs top	bottom
9.	Completion Date:	8/4/00	11. Perfs top	bottom GGTD
		8/4/06	9850	9970
	Completion Date: Name of Producing F		200	bottom QQ70 PBTD or TD
10.	Name of Producing F		9850	9970
10.		Bone Spring	PB50 12. Open Hole casing shoe	9970
10.	Name of Producing F	Bone Soring 15. Name of Pool Requested	PB50 12. Open Hole casing shoe	9970
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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