

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N
17-21 E	XX	XX	XX

paragraph

1. Date:	4/5/2004
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> CHESAPEAKE OPERATING INC	API NUMBER:	30 - 025 - 36472
5. Address of Operator	>> PO BOX 18496 >> OKLAHOMA CITY OK 73154		
6. Lease name or Unit Agreement Name	>> BERTHA J BARBER 7	7. Well Number	# - 1
8. Well Location	Unit Letter: I 2210 feet from the S line and 495 feet from the E line Section 7 Township 20S Range 37E		

9. Completion Date:	01/21/2004	11. Perfs	Top	6860	Bottom	7688
10. Name of Producing Formation(s)	ABO	12. Open Hole Casing shoe	PBTD or TD Open Hole			

13. C-123 Filed:	Date	15. Name of Pool Requested:	MONUMENT;ABO	Pool ID num	46970
Y	N				
16. Remarks:	EXTEND				

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	MONUMENT;ABO	46970
T 20 S, R 37 E		
SEC 7: SE/4		

19. Advertised for HEARING:	20. Case Number
Scheduled for Hearing in May 2004	
21. Name of pool for which was advertised.	Pool ID num
MONUMENT;ABO	46970
22. Placed in Pool	23. By order number
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