REFERENCE SHEET FOR UNDESIGNATED WELLS

1. Date: 5/18/0	4
2. Type of Well: Oil Well Gas	Well
3. County; Lea	

4. Operator Name: Mar Dob Energy Corp		API NUMBER 30.025-35053
5. Address of Operator:		
l		
PD Box 227 Artesia NM	88211	
7. Lease name or Unit Agreement Name:		7. Well No.
Delaware Federal		1 16
8. Well Location		Construction (Inc.)
Unit Letter <u> </u>	line and 660	_feet from theline
Section 18 Township 195	Range 32e NMPM	
9. Completion Date:	11. Perfs top	bottom
4/22/04	6910	6924
10. Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
Delaware		8 250
14. C-123 Filed: 15. Name of Pool Requested	d:	
Lusk Dela	41500	
16. Remarks		
1 644		

TOE	TO BE COMPLETED BY DISTRICT GEOLOGIST							
17.	POOL NAME						18. POOLID#	
T	S, R	Е	Т	S, R	E	Т	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.		•	.• •		<u> </u>			
22a. Placed in Pool	•			-	22b	. By order number		
