

**REFERENCE SHEET FOR
UNDESIGNATED WELLS**

	Fm	Pm	N
22-26 W	XX	XX	XX

paragraph **qqq**

1. Date:	03/21/2003
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> ECHO PRODUCTION INC	APT NUMBER:	30 - 025 - 35312
5. Address of Operator	>> PO BOX 1210		
	>> GRAHAM TX 76450		
6. Lease name or Unit Agreement Name	>> CORSAIR 27 FEDERAL	7. Well Number	# - 2
8. Well Location	Unit Letter: N 660 feet from the S line and 1980 feet from the W line		
	Section 27 Township 23S Range 32E		

9. Completion Date:	03/10/2001	11. Perfs	Top	Bottom
			8173	8195
10. Name of Producing Formation(s)	DELAWARE	12. Open Hole Casing shoe	PBTD or TD Open Hole	

13. C-123 Filed:	Date	15. Name of Pool Requested:	Pool ID num
Y ☐ N ☒		TRISTE DRAW;DELAWARE	59930
16. Remarks:	EXTEND		

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	TRISTE DRAW;DELAWARE	59930
T 23 S, R 32 E SEC 27: SW/4		

19. Advertised for HEARING:	20. Case Number
Scheduled for Hearing in April 2004	13260
21. Name of pool for which was advertised.	Pool ID num
TRISTE DRAW;DELAWARE	59930
22. Placed in Pool	23. By order number
	R- 12141