

**REFERENCE SHEET FOR
UNDESIGNATED WELLS**

	Fm	Pm	N
17-21 E	XX	XX	XX

paragraph **VV**

1. Date:	05/01/2003
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> TRILOGY OPERATING INC	API NUMBER:	30 - 025 - 36144
5. Address of Operator	>> PO BOX 2606		
	>> MIDLAND TX 79708		
6. Lease name or Unit Agreement Name	>> PHILLIPS	7. Well Number	# - 1
8. Well Location	Unit Letter: E 1980 feet from the N line and 330 feet from the W line		
	Section 19 Township 19S Range 39E		

9. Completion Date:	04/25/2003	11. Perts	Top	Bottom
			7436	7641
10. Name of Producing Formation(s)	ABO	12. Open Hole Casing shoe	PBTD or ID Open Hole	

13. C-123 Filed:	Date	15. Name of Pool Requested:	Pool ID num
Y ☐ N ☒		NADINE;DRINKARD-ABO	47510
16. Remarks:	EXTEND		

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	NADINE;DRINKARD-ABO	47510
T 19 S, R 39 E		
SEC 19: NW/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
NADINE;DRINKARD-ABO	47510
22. Placed in Pool	23. By order number
	R- 12141