

**REFERENCE SHEET FOR
UNDESIGNATED WELLS**

	Fm	Pm	N
11/21 E	XX	XX	X

paragraph **iii**

1. Date:	11/20/2003
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> TOM BROWN INC		APT NUMBER:	30 - 025 - 36308
5. Address of Operator	>> PO BOX 2608			
	>> MIDLAND TX 79702			
6. Lease name or Unit Agreement Name	>> SHELLEY 36 STATE			7. Well Number
				# - 4
8. Well Location				
Unit Letter: K	2310	feet from the	S	line and
Section	36	Township	19S	Range
			37E	
				feet from the
				W
				line

9. Completion Date:	7/31/2003	11. Perts	Top	Bottom
			6972	7030
10. Name of Producing Formation(s)	DRINKARD		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	XX	SKAGGS;DRINKARD
			57000
16. Remarks:	EXTEND		

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	SKAGGS;DRINKARD	57000
T 19 S, R 37 E		
SEC 36: 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
SKAGGS;DRINKARD	57000
22. Placed in Pool	23. By order number
	R- 12141