

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N
12-16 E	XX	XX	XX

paragraph ppp

1. Date:	4/14/2004
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> CHESAPEAKE OPERATING INC	API NUMBER:	30 - 025 - 36450
5. Address of Operator	>> PO BOX 11050		
	>> MIDLAND TX 79702-8050		
6. Lease name or Unit Agreement Name	>> BURRUS 23	7. Well Number	# - 3
8. Well Location	Unit Letter: J 1650 feet from the S line and 2200 feet from the E line		
	Section 23 Township 12S Range 38E		

9. Completion Date:	3/22/2004	11. Perfs	Top	Bottom
			9150	9184
10. Name of Producing Formation(s)	12. Open Hole Casing shoe		PBTD or TD Open Hole	
WOLFCAMP			9800	

13. C-123 Filed:	Date	15. Name of Pool Requested:	Pool ID num
Y <input type="checkbox"/> N <input checked="" type="checkbox"/>		TRINITY;WOLFCAMP	59890
16. Remarks:			
EXTEND			

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	TRINITY;WOLFCAMP	59890
T 12 S, R 38 E		
SEC 23: SE/4		

19. Advertised for HEARING:	20. Case Number
Scheduled for Hearing in April 2004	
21. Name of pool for which was advertised.	Pool ID num
TRINITY;WOLFCAMP	59890
22. Placed in Pool	23. By order number
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