

REFERENCE SHEET FOR  
UNDESIGNATED WELLS

	Fm	Pm	N
17-21 E	XX	XX	XX

paragraph

1. Date:	12/9/04
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:		>> CAPATAZ OPERATING INC		API NUMBER:		30 - 025 - 36689	
5. Address of Operator		>> PO BOX 10549					
		>> MIDLAND TX 79702					
6. Lease name or Unit Agreement Name						7. Well Number	
>> WHITE OWL						# - 1	
8. Well Location							
Unit Letter:	D	582	feet from the	N	line and	330	feet from the
Section	2	Township	20S	Range	38E	W	line
9. Completion Date:				11. Perfs		Top	
11/24/04				5982		Bottom	
10. Name of Producing Formation(s)				12. Open Hole Casing shoe		PBTD or TD Open Hole	
BLINEBRY						7741	
13. C-123 Filed:		Date		15. Name of Pool Requested:		Pool ID num	
Y		N XX		HOUSE;BLINEBRY		33230	
16. Remarks:							
EXTEND							

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	HOUSE;BLINEBRY	33230
T 20 S, R 38 E		
SEC 2: NW/4		

19. Advertised for HEARING:		20. Case Number	
21. Name of pool for which was advertised.		Pool ID num	
HOUSE;BLINEBRY		33230	
22. Placed in Pool		23. By order number	
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