REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N	
12-16 E	XX	XX	XX	

paragraph

1. Date: 12/14/2004

2. Type of Well: Oil: XX Gas:

3. County: LEA

4. Operator: >> CHESAPEAKE OPERATING INC

API NUMBER: 30 - 025 - 36812

5. Address of Operator
>> PO BOX 11050
>> MIDLAND TX 79702-8050

6. Lease name or Unit Agreement Name: >> STATE 22

7. Well Number: # - 2

8. Well Location
Unit Letter: C 217 feet from the N line and 2417 feet from the W line
Section 22 Township 12S Range 38E

9. Completion Date: 10/19/2004

11. Perfs Top: 9040 Bottom: 9074

10. Name of Producing Formation(s): WOLFCAMP

12. Open Hole Casing shoe:

PBTD or TD Open Hole: 9800

13. C-123 Filed: Y [ ] N [XX] Date:

15. Name of Pool Requested: TRINITY;WOLFCAMP Pool ID num: 59890

16. Remarks: EXTEND

TO BE COMPLETED BY DISTRICT GEOLOGIST

17. Action taken: EXTEND

18. Pool Name: TRINITY;WOLFCAMP Pool ID num: 59890

T 12 S, R 38 E

SEC 22: NW/4

19. Advertised for HEARING:

20. Case Number

21. Name of pool for which was advertised: TRINITY;WOLFCAMP Pool ID num: 59890

22. Placed in Pool

23. By order number: R-