

**REFERENCE SHEET FOR
UNDESIGNATED WELLS**

	Fm	Pm	N	Pc
17-21 C	XX	XX	XX	

paragraph

1. Date: 8/8/2012	
2. Type of Well:	
Oil: XX	Gas:
3. County: LEA	

4. Operator: COG OPERATING LLC								API NUMBER 30 - 025 - 40425	
5. Address of Operator 2208 W MAIN ST ARTESIA NM 88210									
6. Lease name or Unit Agreement Name >> WEST PEARL 36 STATE								7. Well Number # - 2H	
8. Well Location		FTG N/S	N/S	FTG E/W	E/W	SEC	TWN	RNG	
SLOC	D	380	N	330	W	36	19S	34E	TD 15315
BHLOC	A	317	N	329	E	36	19S	34E	PBTD
9. Completion Date: 7/28/2012								11. Piers TOP 11444	
10. Name of Producing Formation(s) BONE SPRING								12. Open Hole TOP BOTTOM 15268	
13. C-123 Filed		Date		15. Name of Pool Requested or temporary Wildcat designation:				Pool ID num	
Y N XX				LEA;BONE SPRING				37570	
16. Remarks: EXTEND									

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken EXTEND	18. Pool Name LEA;BONE SPRING	Pool ID num 37570
T 19 S, R 34 E SEC 36: NE/4		

19. Advertised for HEARING:		20. Case Number	
21. Name of pool for which was advertised. LEA;BONE SPRING		Pool ID num 37570	
22. Placed in Pool		23. By order number R-	