

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N
17-21 E	XX	XX	XX

paragraph

1. Date:	5/17/2005
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> CHESAPEAKE OPERATING INC	API NUMBER:	30 - 025 - 37041
5. Address of Operator	>> PO BOX 11050 >> MIDLAND TX 79702-8050		
6. Lease name or Unit Agreement Name	>> TCB 36 STATE	7. Well Number	# - 4
8. Well Location	Unit Letter: L 1980 feet from the S line and 660 feet from the W line Section 36 Township 20S Range 38E		

9. Completion Date:	4/22/2005	11. Perfs	Top 7029	Bottom 7068
10. Name of Producing Formation(s)	DRINKARD	12. Open Hole Casing shoe	PBTD or TD Open Hole 7405	

13. C-123 Filed:	Date	15. Name of Pool Requested:	Pool ID num
Y <input type="checkbox"/> N <input checked="" type="checkbox"/>		WARREN;DRINKARD, EAST	63120
16. Remarks:			
EXTEND			

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	WARREN;DRINKARD, EAST	63120
T 20 S, R 38 E		
SEC 36: SW/4		

19. Advertised for HEARING:	20. Case Number
Scheduled for Hearing in May 2005	
21. Name of pool for which was advertised.	Pool ID num
WARREN;DRINKARD, EAST	63120
22. Placed in Pool	23. By order number
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