

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N
12-16 E	XX	XX	XX

paragraph

1. Date:	5/25/2005
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	>> CHESAPEAKE OPERATING INC	API NUMBER:	30 - 025 - 37097
5. Address of Operator	>> PO BOX 11050		
	>> MIDLAND TX 79702		
6. Lease name or Unit Agreement Name	>> BURRUS 27	7. Well Number	# - 12
8. Well Location	Unit Letter: O 990 feet from the S line and 2270 feet from the E line		
	Section 27	Township 12S	Range 38E

9. Completion Date:	04/30/2005	11. Perfs	Top 9066	Bottom 9095
10. Name of Producing Formation(s)	WOLFCAMP	12. Open Hole Casing shoe	PBTD or TD Open Hole 9404	

13. C-123 Filed:	Date	15. Name of Pool Requested:	TRINITY;WOLFCAMP	Pool ID num 59890
Y	N	XX		
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 27: SE/4		

19. Advertised for HEARING:	20. Case Number
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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